

Flathead City-County Health Department

1035 1st Ave. West Kalispell, MT 59901 (406)-751-8101 FAX 751-8102 www.flatheadhealth.org Community Health Services 406-751-8110 FAX 866-380-1740 Environmental Health Services 406-751-8130 FAX 406-751-8131 Flathead Family Planning 406-751-8150 FAX 855-931-9091 Population Health Services 406-751-8101 FAX 406-758-2497 WIC Services 406-751-8170 FAX 406-751-8171 Animal Shelter 406-752-1310 FAX 406-752-1546

Agenda FLATHEAD CITY-COUNTY BOARD OF HEALTH

MEETING AGENDA January 18, 2022

1:00-3:00PM

Conference Room A/B in the Earl Bennett Building

We are continuing to use our in person meeting policy. The number of individuals in the audience that can be in the board room at one time will be limited based on social distancing.

In Person OR Zoom/Phone

To register or submit public comment please click here and submit by 11 am on 01/18/2022

- 1. Call to Order
- 2. Attendance
- 3. Approval of Agenda
- 4. Citizen Comment
 - Written Public Comment~ Will be uploaded day of meeting at 11:30 am
 - Verbal Citizen Comment
- 5. Approve Minutes for December 16, 2021 Meeting
- 6. Election of Officers
- 7. 2022 Committee Appointments
 - o <u>Committee Appointments</u>
- 8. Departmental Reports
 - Animal Shelter
 - o Environmental Health
 - o Community Health
 - Population Health
 - Mosquito
 - o Finance
 - Health Officers Report
- 9. Committee Reports
 - No Committee Reports at this time
- 10. Board Member Discussion
- 11. Adjournment

Divisions not providing verbal presentations this month:

- o Home Health
- o Family Planning





First and Last Name

Thomas Millett

City of Residence

Marion

Public Comment

Health Board Member,

The Flathead City-County Health Officer Joe Russell has gone rogue.

What has he done? Well...

Joe has significantly changed the quarantine protocol for local school children to include forgoing the stay-at-home quarantine for the highly vaccinated children ONLY. (See the policy put out by Joe on January 3, 2022.)

This is segregation and unlawful discrimination.

In Montana this is illegal per Montana's non-discrimination policy HB702 and codified at Montana Code Annotated (MCA) 49-2-312 where discrimination based on vaccination status is prohibited.

Also note, CDC recommendations or guidance DOES NOT supersede Montana state law.

In addition, Joe has overstepped his lawful authority and unilaterally changed the isolation and quarantine measures on his own. Per state law at MCA 50-2-118(d) the Health Officer is only allowed to "establish and maintain quarantine and isolation measures as adopted by the local board of health and per MCA 50-2-116(e)(iii) only the Board of Health is allowed to "identify, assess, prevent, and ameliorate conditions of public health importance through...isolation and quarantine measures".

In layman's terms, the Board of Health SETS the isolation and quarantine policy and the Health Officer carries out the policy. In this case, Joe has both set and implemented policy and has bypassed the Health Board. Joe has, in effect, violated state law.

Accordingly, as a citizen of Flathead County, I demand that you:

- Immediately rescind the current 'COVID-19 Isolation and Quarantine Guidance' put out by the Health Department to all the schools.
- Change said guidance to conform to state anti-discrimination laws if it is indeed a policy that the Health Board wants to adopt.

• Educate all school districts who received this guidance document that it is not IAW state law and educate them on
state anti-discrimination laws as pertaining to vaccination status.

• Publicly rebuke and reprimand Joe Russell for his egregious behavior and unlawful actions.

Respectfully submitted.

Thomas Millett

First and Last Name

Alicia C Gower

City of Residence

KALISPELL

Public Comment

I will not let anyone know my vaccination status because people like Joe are dividing us and causing discrimination among the vaccinated and unvaccinated. It should be a choice, if you're vaccinated bless you, if you're not vaccinated bless you. This health official should not be segregating children based on vaccinations status or quarantining.

First and Last Name Vaughn Penrod	
City of Residence Bigfork	
Public Comment Joe Russell needs to follow the state law and work with the board as written.	

First and Last Name Kirk MacKenzie	
City of Residence Bigfork	
Public Comment I am opposed to Joe Russel's actions to discriminate against the unvaccinated.	

First and Last Name

Carrey Hirt

City of Residence

Whitefish

Public Comment

Health Board Members,

We the People are paying close attention to the actions of this board, and specifically Joe Russell. But the question is, are you?

Joe Russell's actions are deeply disturbing to say the least. He is routinely breaking Montana law. How can you stand for this? Does this make you complicit?

We the people are calling on you to take notice and act on these issues:

- 1) Russell has been segregating and discriminating against unvaccinated children. I hope you realize this is a VIOLATION of MT law (MCA 49-312)
- 2) Joe Russell is also violating state law by setting and implementing the isolating/quarantining of public school students without Health Board approval.

This has been going on for some time, as I trust you are aware.

The health board's "Covid-19 Isolation and Quarantine Guidance" MUST BE rescinded immediately and any further guidance MUST conform to all state law!

I look forward to your actions that will rectify the above serious issues.

Thank You

First and Last Name	
Bonnie A Foy	
City of Residence	
Kalispell	

Public Comment

Joe Russell has violated state law by unilaterally setting and implementing isolation and quarantine measures for public school children without approval of the Board of Health.

First and Last Name Jessica Kirkendall City of Residence Kalispell **Public Comment** Dear FCC Health Board, Please be informed that your Health Officer has once again significantly changed the quarantine protocol for local school children including "forgo the stay at home quarantine" for the highly vaccinated children ONLY. The children who were injected with Pfizer last summer are all lumped in with the unvaccinated group now as are any children who took the J&J three months ago. This is segregation and unlawful discrimination. In Montana this is illegal per Montana's non-discrimination policy HB702 and codified at Montana Code Ann 49-2-312 where discrimination based on vaccination status is prohibited. Was this quarantine protocol change completed in a non transparent way again? When was the public meeting for the health board to discuss and vote to approve the new local quarantine procedure? Did ANY of the Health Board members review the new protocol? The new procedure was emailed out to local parents last week in districts where the Health Officer works directly with the Superintendent to quarantine and test children but not in other districts where Health Officer doesn't have a direct line of communication. What were the results of investigating children being injected with emergency use authorization experimental product at the fairgrounds WITHOUT informed consent? There's still time to do what is right and go physically view those lack of forms at the fairgrounds for 3 more weeks of injecting 12 year olds with experimental product. THIS Covid agenda on healthy students WILL continue until YOU end it. Our children deserve better and remember as local leaders that you support the results that you tolerate. I urge you to take a stand against unlawful unhealthy protocols authored by your health officer. Thank you, Jessica Kirkendall Children's Health Advocate

First and Last Name

Deborah Wilson

City of Residence

Kila, Montana

Public Comment

Updated Covid-19 Isolation and Quarantine Guidance dated January 3, 2021 by Joe Russell violates state law MCA 49-2-312. This was put out to all schools unilaterally setting and implementing isolation and quarantine measures for public school children without approval of the Board of Health. This must be rescinded and changed to conform to state anti-discrimination laws. Joe Russell needs to be held accountable for his total disregard for laws that he should follow. If Joe Russell has no respect for the law and follows through with unlawful actions, how do you expect the general public to show respect for memorandums and guidance that he tries to impose upon schools and the general public?

First and Last Name

Keely Saner

City of Residence

Bigfork

Public Comment

To the Flathead Valley Health board,

I am writing as a citizen of the Flathead Valley, who has two children attending local schools. It has been brought to my attention that there is intent by the public health officer/ health board, to create new quarantine guidelines based on a child's' vaccination status.

These quarantine guidelines are in direction violation of Montana law HB702, which states that "discrimination based on vaccination status or possession of immunity passport is prohibited". Instructing vaccinated school children to guarantine differently than unvaccinated children, is discrimination.

The law goes on to state "it is unlawful discriminatory practice for: c) A public accommodation to exclude, limit, segregate, refuse to serve, or otherwise discriminate against a person based on the person vaccination status..."

By implementing different quarantine guidelines for children based on their vaccination status, you are encouraging the segregation and discrimination based on their medical status.

Not only is this a violation of Montana law, it's also in direct contradiction to the CDC, which on its website states "Omicron infection can spread the virus to others even if they are vaccinated or don't have symptoms".

Therefore it is reckless (and not based on science), to require that the unvaccinated school children quarantine differently from the vaccinated school children, when according to the CDC, BOTH groups can contract and transmit the virus the SAME, regardless of vaccination status.

If the Flathead County health board continues with this discriminatory practice, it will invite lawsuits from across the county. I personally will be contacting the Attorney General, and the Lieutenant Governor, so that they be aware and informed as to what is being put forth in our community, and can take any steps necessary on a state level. Not only does this new policy violate Montana law, but it violates everything that Montanans stand for - Liberty, Equality, and Privacy.

I encourage you to change the new quarantine directives immediately. Thank you for your time.

First and Last Name	
Dave Swaim	
City of Residence	
Evergreen	

Public Comment

The legal violations being committed by the Health Officer have become increasingly egregious. I know the school issues have been described in detail by others. The failure of a majority of the Health Board and County Commissioners to perform their duty to take corrective action is glaring. Please uphold the law.

First and Last Name

Katherine Hanson

City of Residence

Marion

Public Comment

The VAERS Aug. 6, 2021, reports of serious events and deaths following COVID-19 vaccines represented 39% of serious events and 51% of deaths ever reported to VAERS since 1990. The attached report from the CDC website, will confirm this.

Currently, all vaccines, that actually have product, are still only approved under EUA. The status of EUA, in the case of Covid19 vaccines per the FDA, means that the final stage of testing is being done on the general public, which requires informed consent. Informed consent requires that the test subject be informed of adverse events involving the product. The attached report and so many other reports available on the FDA, CDC and WHO websites regarding these vaccines clearly show the number of adverse events from the Covid19 vaccines need to be fairly discussed with the public on an even keel with the promotion of the vaccines.

It is a persons right to join in medical trials, such as being vaccinated with the EUA covid19 vaccine, but it is the duty of the department of health to protect and inform the public in all ways possibly, which includes sharing both sides of the effects of a vaccine that per Pfizer's report, in the first 60 days of use caused over 1,200 deaths. I request that the health department include a page on their website to include reports of adverse effects of the vaccines as well as studies that support the findings such as the attached.

Please don't be the salesman pushing the maybe it will work vehicle when the parts are missing and exploding in clear view as is happening with the Covid19 vaccines.

https://downloads.regulations.gov/CDC-2021-0089-0024/attachment 2.pdf

First and Last Name	
Patrick Staunton	
City of Residence	

Public Comment

As an active flathead county citizen and voter I would like to voice my extreme disappointment in the health board's lack of control over current Health Officer Joe Russell. Mr. Russell's repeated unilateral actions regarding quarantine periods for children are in violation of state law and have not been approved by the board of health as is required. The document "COVID-19 Isolation and Quarantine Guidance" is in direct violation of state law HB 702, and we as flathead citizens will not accept this overt breach of state law. Mr Russell needs to be publicly reprimanded and in my opinion immediately removed from his position for flagrant violation of his employment duties and state law.

Thank you for your time

First and Last Name
Scotia Brosnan
City of Residence
Kalispell
Public Comment
Joe Russell has once again violated state law, MCA 49-2-312 implementing segregation, discrimination against unvaccinated public school children.
While the county commissioners turn a blind eye, giving tacit approval of Russell violating state law by unilaterally setting and implementing isolation and quarantine measures for public school children while bypassing approval of the Board of Health.
The COVID-19 Isolation and Quarantine Guidance put out by the Health Department to all the schools MUST BE RESCINDED IMMEDIATELY, revised to conform to state anti-discrimination laws.
Additionally, the CDC issues guidance, recommendations that do NOT supercede Montana state law.
Commissioner Holmquist: you need to do your job for a change. It's evident all you care about are personal, political agendas as this has never been about public health. Joe Russell needs to be publicly rebuked, reprimanded for his unlawful actions. Elections have consequences with you personally responsible for Joe Russell's egregious conduct, flagrant disregard for the law.
Thank you.
Sincerely,
Scotia Brosnan
Kalispell Montana

First and Last Name

stephanie elm

City of Residence

Flathead

Public Comment

It has come to my attention that Joe has illegally with out due legal protocol has changed the quarantine guidelines for students. This man needs to be fired! the quarantine guidelines need to be dropped so we can stop with ruining childrens lives and opportunities to be properly educated.

First and Last Name

Krista Harrison

City of Residence

Kalispell

Public Comment

Please do your due diligence to make sure laws and regulations - especially those that were voted in by Montanan citizens - are respected and adhered to as you determine health measures for Flathead County (MCA 50-2-118(d) and MCA 50-2-116(e)(iii) and HB 702). In cases where the law has already been ignored and violated - please be accountable and right this wrong.

FLATHEAD CITY/COUNTY BOARD OF HEALTH MINUTES OF REGULAR MEETING JANUARY 18TH, 2022 ZOOM/PHONE EARL BENNETT BUILDING 1035 1ST AVENUE WEST KALISPELL, MONTANA

VIDEO: January 2022 BOH Meeting - YouTube

Members Present	Other At	tendees
Pamela Holmquist	Joe Russell	Jake Kirby
Don Barnhart	Jenelle Grau	Maziee Kirby
Pete Heyboer, MD	Audrey Despain-Price	Chuck Bright
Ardis Larsen	Hanna Karev	Ben Konkel
Rod Kuntz	John Fuller	Dennis Mills
Jessica Malberg-Fiftal,DVM.MSPH,DACVR	Diana Southard	Shawn Padina
Annie Bukacek, MD	Teresa Farr	Kerry Johnston
Ronalee Skees	Karen Rogers	Gina& Garry Gosnell
	John Rowan	Dennis Gomez
	Maddie Howard	Dane Clark
	Jessica Kirkendall-Zoom	Deborah Wilson-Zoom
	Thomas Millett	

1. Call to Order

Vice Chairperson Pamela Holmquist called the meeting to order at (1:00pm)
 No Video due to technical difficulties.

2. Attendance

Roll Call.

Annie Bukacek arrives at 1:07pm No Video due to technical difficulties.

3. Approval of Agenda

• Ronalee Skees moves to approve the agenda as provided; Rod Kuntz seconds the motion.

All Ayes

No Video due to technical difficulties

Motion passes

4. Citizen Comment

Written Citizen Comment:

• Written Citizen Comment was uploaded to the agenda.

Verbal Citizen Comment:

- Hanna Karev gave comment about COVID Started at (0:00:01)
- Shawn Padina gave comment about COVID. Started at (0:05:38)
- Jake Kirby gave comment about COVID. Started at (0:10:35)
- Dennis Gomez gave comment about COVID. Started at (0:14:43)

- Teresa Farr gave comment about COVID. Started at (0:16:25)
- Dane Clark gave comment about COVID. Started at (0:24:26)
- Diana Southard gave comment about COVID. Started at (0:30:27)
- Deborah Wilson gave comment about COVID. Started at (0:40:58)
- Jessica Kirkendall gave comment about COVID. Started at (0:43:03)

5. Approval of Meeting Minutes for December 16th, 2021

Ronalee Skees moves to approve the minutes; Ardis Larsen seconds the motion.
 All Ayes. Started at (0:49:05)

Motion passes

6. Election of Officers

 Ronalee Skees moves to nominate Roger Noble for Chairperson for another term, Jessica Malberg seconds the motion. All Ayes. Started at (0:50:39)

Motion Passes

 Ardis Larsen moves to nominate Pamela Holmquist for Vice Chairperson for another term, Ronalee Skees seconds the motion. Started at (0:51:47)

Motion Passes

7. 2022 Committee Appointments

 Ronalee Skees moves to nominate Roger Noble for the Solid Waste Board; Jessica Malberg seconds the motion.

All Ayes. Started at (0:53:13)

Motion passes

8. Departmental Reports

Animal Shelter

- Cliff Bennett discussed annual report, euthanasia, rabies vaccination, housing, Betty White donations, and new equipment. Started at (0:54:51)
- Jessica Malberg asks about Rabies cases. Started at (1:00:42)

Environmental Health

- Kate Cassidy discussed food inspections increase, septic applications. Started at (1:01:18)
- Ardis Larsen asks about plan reviews. Started at (1:03:51)

Population Health

 Jennifer Rankosky discussed Communicable Disease; December was a slow month. Started at (1:05:50)

Mosquito

 Jake Rubow discussed site inspections, mechanical issues with ATV, and getting another truck for the program. Started at (1:06:43)

Finance

- Kirk Zander discussed the questions Annie Bukacek had and grants, also mentions the 4% increase on February 4th, general health fund, home health. Started at (1:09:14)
- Ronalee Skees mentions over or under budget. Started at (1:14:40)

Health Officers Report

- Ronalee Skees asks about Family planning and inmates being seen. Started at (1:20:43)
- Joseph Russell discussed COVID, new cases per day, positivity rate, testing, breakthrough cases. Started at (1:22:33)

- Joseph Russell mentions that February 1st will be the last mass vaccine clinic held at the Fairgrounds. Started at (1:25:11)
- Joseph Russell discussed average daily census, guidance documents and policies. Started at (1:25:46)
- Joseph Russell discussed House Bill 702, administrative rules, powers, and duties of the Board. Started at (1:29:11)
- Pamela Holmquist mentions masking and vaccination. Started at (1:35:37)
- Annie Bukacek discussed March 19th, 2020, meeting, shutting down businesses and restaurants. Started at (1:41:22)
- Ronalee Skees mentions governor's mandate. Started at (1:42:58)
- Annie Bukacek discussed letters for isolation and guarantining. Started at (1:45:44)
- Joseph Russell explains the difference between isolation and quarantining. Started at (1:47:35)
- Joseph Russell discussed administrative rules, protecting public health, suicides, keeping schools open. Started at (1:54:10)
- Annie Bukacek mentions keeping schools open and masking. Started at (2:00:07)
- Pamela Holmquist discussed decisions, mandates. Started at (2:02:08)
- Jessica Malberg asks about antigen tests timeline, positivity rate. (2:02:46)
- Rod Kuntz discussed public comment, guidance, legal standing, antibody tests. Started at (2:04:02)
- Don Barnhart mentions common thread, federal government, mandating. Started at (2:07:48)

9. Committee Reports

No Committee Reports at this time

10. Board Member Discussion

- Annie Bukacek gave comment. Started at (2:10:57)
- Rod Kuntz gave comment. Started at (2:12:21)
- Ronalee Skees gave comment. Started at (2:14:27)
- Jessica Malberg gave comment. Started at (2:18:02)
- Pamela Holmquist gave comment. Started at (2:18:53)

11. Adjournment

Meeting ended at (2:19:24)

Approved by Pamela Holmquist

Date of Approval

FLATHEAD CITY – COUNTY BOARD OF HEALTH

2022 COMMITTEE APPOINTMENTS

Environmental Health Committee

Chair: Roger Noble

Members: Ardis Larsen, Pam Holmquist, and Don Barnhart

COVID-19 Committee

Chair: Pete Heyboer

Members: Jessica Malberg, and Rod Kuntz

Home Health Operations Committee

Chair: Pete Heyboer

Members: Ardis Larsen, Ronalee Skees, and Joe Russell

Budget/Finance Committee

Chair: Ronalee Skees

Members: Pam Holmquist, Ardis Larsen, and Rod Kuntz

Behavioral Health Committee

Chair: Jessica Malberg

Members: Ronalee Skees, and Pete Heyboer

Personnel Committee

Chair: Pam Holmquist

Members: Don Barnhart, Ronalee Skees, and Jessica Malberg

Solid Waste Board

Roger Noble

Animal Shelter Monthly Board of Health Report - Dec., 2021														
		12 Month												
FLATHEAD COUNTY ANIMAL SHELTER	Dec-21	Running Average	Running Total	Nov-21	Oct-21	Sep-21	Aug-21	Jul-21	Jun-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21
Dog Beginning Pop.	15	15		20	17	16	26	13	20	16	9		9	4
Dogs In	56	71	854	71	73	61	72	106	86	76	78	71	45	59
Owned	20	18	210	20	16	21	21	24	19	11	20	17	12	9
Stray	36	53	635	51	57	37	50	82	65	64	57	53	33	50
DOA In	0	1	9	0	0	3	1	0	2	1	1	1	0	0
Dogs Out	53	70	839	75	70	60	82	93	93	72	71	74	42	54
Adopted	26	23	278	29	20	22	33	26	31	26	18	16	16	15
Rescued	1	1	12	2	1	0	0	2	0	0	0	0	0	6
Return To Owner	23	42	504	38	46	32	45	65	56	42	50	55	22	30
Escaped	0	0	2	1	1	0	0	0	0	0	0	0	0	0
Died	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Euthanized	3	3	34	5	2	3	3	0	4	3	2	2	4	3
DOA Out	0	1	9	0	0	3	1	0	2	1	1	1	0	0
Ending Population	18	16	192	16	20	17	16	26	13	20	16	9	12	9
Cat Beginning Pop.	25	19	222	15	14	20	26	24	25	19	15	10	14	15
Cats In	22	39	471	40	42	44	53	52	40	47	32	27	30	42
Owned	15	15	174	11	17	12	30	14	13	19	15	12	9	7
Stray	5	20	241	27	21	21	16	34	22	26	12	14	18	25
Service In	2	4	49	2	2	8	7	4	4	1	5	1	3	10
DOA in	0	1	7	0	2	3	0	0	1	1	0	0	0	0
Cats Out	36	40	476	30	41	50	60	50	41	41	28	22	34	43
Adopted	25	28	332	21	30	30	38	36	31	34	19	18	26	24
Rescued	0	0	2	0	0	1	0	0	0	0	0	1	0	0
Return To Owner	1	1	14	0	1	0	1	2	0	2	2	1	1	3
Escaped	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Died	0	1	11	0	0	4	1	1	2	0	1	0	1	1
DOA Out	0	1	7	0	2	3	0	0	1	1	0	0	0	0
Euthanized	1	2		1	2	2	2	3	0	1	1	0	3	3
Return to Field	9	8		8	6	10	18	8	7	3	5		3	12
Ending Population	11	18		25	15	14	20	26	24	25	19		10	14
Total In	78	110	1325	111	115	105	125	158	126	123	110		75	101
Total Out	89	110		105	111	110	142	143	134	113	99		76	97
Past 12 Months:	Asiloma	r Live R	elease F	Rate- 96.	75%; L	ength o	f Stay:	Dogs - 6	6.0 days	; Cats -	14.1 da	ys		



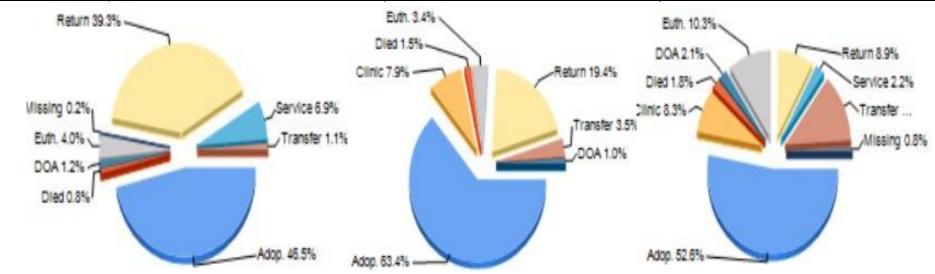


Annual Report - 2021

does not include your shelter's data

does not include your shelter's data

Start Date: January 01, 2021	Th	is Shelter	•	Montana (10	other orga	nizations)	U. S. (1433 other organizations)			
End Date: December 31, 2021	Dog	Cat	Other	Dog	Cat	Other	Dog	Cat	Other	
Totals by Outcome										
Adoption	278	332	0	2,250	3,925	201	406,263	514,833	34,528	
Clinic	0	0	0	147	643	3	62,369	86,738	1,255	
Died	0	11	0	11	133	3	6,273	23,748	2,791	
DOA	9	7	0	8	34	0	12,606	15,089	10,191	
Euthanasia	34	19	0	159	175	3	70,696	99,261	17,691	
Missing	2	0	0	0	1	0	1,791	2,904	193	
Return To Owner	504	14	0	1,579	364	5	135,652	23,364	2,002	
Return to Field	0	91	0	15	46	0	7,220	32,306	344	
Transfer	12	2	0	65	216	66	126,183	102,037	9,709	
Wildlife	0	0	0	0	0	0	0	1	9,889	
Total	839	476	0	4,234	5,537	281	829,053	900,281	88,593	
Animal Length of Stay (days)	6.0	14.1	0	15.8	31.3	14.8	23.1	34.2	20.8	



Flathead City-County Health Department: Environmental Health Services for Dec. 2021

		1										1	1	1
		12	12											
		Month	Month											
		Running	_											
	Dec-21	Average	Total	Nov-21	Oct-21	Sept-21	Aug-21	July-21	June-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21
Food and Consumer Safety														
Food Service Inspections	107	130.8	1569	144	132	136	113	149	130	151	139	153	116	99
Trailer Courts/R V Parks	1	9.5	114	0	0	6	31	25	31	20	0		0	0
Motels/Public Accomodations	22	36.3	435	27	38	28	33	41	80	69	31	33	14	19
Pools/Spas	12	16.8	201	6	26	21	10	29	25	6	9	24	7	26
Daycares/Group Homes	1	2.3	27	2	1	2	11	3	1	2	1	1	2	0
Plan Review	28	43.8	526	36	30	47	31	51	87	64	73	44	24	11
School Faciltiy Inspections	0	0.7	8	0	0	0	0	0	0	0	0	8	0	0
Misc FCSS Complaints	1	1.5	18	1	1	0	5	4	2	1	1	2	0	0
Septic System Activity														
Applications received	51	82.9	995	51	77	66	89	94	87	107	146	101	71	55
Permit Issued (sold)	44	62.3	747	59	77	83	102	72	80	79	49	45	24	33
Site Evaluations - OS	36	40.3	483	31	48	53	47	39	50	46	66	29	14	24
Site Reviews- SR	19	38.0	456	23	34	33	40	53	51	56	52	47	21	27
Septic Systems Inspected- Final	40	55.0	660	71	80	94	65	82	51	64	42	21	18	32
Subdivision Activity														
Applications Received Contract	36	20.3	243	12	17	17	18	21	22	26	24	18	16	16
Applications Received N/C	4	3.6	43	1	8	7	2	1	1	1	5	1	6	6
Applications Reviewed (FC)	2	2.3	27	4	0	1	1	0	0	7	0	12	0	0
All lots approved (DEQ & FC)	13	33.6	403	34	22	29	62	21	45	12	16	13	68	68
Site visits completed	11	15.6	187	10	18	13	16	22	31	19	27	14	3	3

Flathead City-County Environmental Health Services

Monthly Food Purveyors Inspection Report

107 Inspections December-21										
Establishment	Facility	City	License	Date	Purpose	Grade	Inspector			
TARS, LLC	Food Service	Kalispell	FS318874 - 1	1-Dec-2021	Routine	A+	Jossolyn Becker			
Cowboy Up	Mobile (Trailer)	Somers	FS307518 - 7	1-Dec-2021	Routine	N/A	Jossolyn Becker			
Junction Gas	Store	Columbia Falls	FS849 - 9	1-Dec-2021	Routine	Α	Darin Woeppel			
Kellys Pub & Casino	Bar	Columbia Falls	FL0619 - 2	1-Dec-2021	Routine	A+	Darin Woeppel			
Bigfork BBQ	Mobile (Trailer)	Bigfork	FL318199 - 7	1-Dec-2021		N/A	Environmental Health			
Marion Hts Railline Tav. LLC	Tavern/Bar	Marion	FS45528 - 2	1-Dec-2021		N/A	Danielle Peirce			
Orient Express	Food Service	Whitefish	FL10474 - 1	1-Dec-2021	•	A-	Jossolyn Becker			
Beargrass Bistro	Food Service	Lakeside	FL312854 - 1	1-Dec-2021	Routine	A+	Jossolyn Becker			
Fork in the Road	Mobile (Truck)	Whitefish	FS313085 - 7	2-Dec-2021	Routine	N/A	Environmental Health			
Montana Academy Inc.	Food Service	Marion	FS13109 - 1	2-Dec-2021	Routine	A+	Danielle Peirce			
Montana Global Health	Wholesale Mfg.	Kalispell	FM315870 - 13	2-Dec-2021	Routine	A+	Danielle Peirce			
Lodge at McGregor Lake, The	Food Service	Marion	FL315403 - 1	2-Dec-2021		N/A	Danielle Peirce			
Treasure State Coffee Co	Food Service	Lakeside		2-Dec-2021	Pre-Operationa	N/A	Jossolyn Becker			
KM Bar & Merc. Steak	Food Service	Kalispell	FL318041 - 1	2-Dec-2021	Routine	Α	Darin Woeppel			
Town Pump of Whitefish	Food Service	Whitefish	FL6813 - 1	2-Dec-2021	Routine	Α	Darin Woeppel			
Wasabi Sushi Bar	Food Service	Whitefish	FL45055 - 1	2-Dec-2021	Routine	Α	Darin Woeppel			
Stumptown Ice Den	Food Service	Whitefish	FL310075 - 1	2-Dec-2021	Routine	A-	Darin Woeppel			
Second Street Pizza	Food Service	Whitefish	FL317327 - 1	2-Dec-2021	Routine	N/A	Darin Woeppel			
Sweet Peaks Ice Cream 4	Mobile (Van)	Whitefish	FS313463	3-Dec-2021	Routine	N/A	Darin Woeppel			
Del's of Somers	Food Service	Somers	FS4908 - 1	3-Dec-2021	Routine	A+	Jossolyn Becker			
Town Pump of Kalispell #2	Store	Kalispell	FL10082 - 9	3-Dec-2021	Routine	B-	Jossolyn Becker			
Chi Cafe & Samurai Seafood	Food Service	Kalispell	FS315212 - 1	3-Dec-2021	Routine	A-	Jesse M Green			
Central Ave. Bakery & Deli	Food Service	Whitefish	FL305247 - 1	3-Dec-2021	Routine	A+	Danielle Peirce			
Great Northern Cycle & Ski	Food Service	Whitefish	FS310640 - 1	3-Dec-2021	Routine	A+	Danielle Peirce			
Flathead Valley Hockey Assoc.	Food Service	Kalispell	NP - 0003	3-Dec-2021	Routine	A+	Jesse M Green			
Blind Hot Sauce	Wholesale Mfg.	Kalispell	FM309790	6-Dec-2021	Routine	A+	Jesse M Green			
Albertsons #2018	Deli	Kalispell	FL80666 - 11	6-Dec-2021	Routine	A-	Jesse M Green			
AFC Sushi (Albertsons)	Food Service	Kalispell	FS313126 - 1	6-Dec-2021	Routine	A+	Jesse M Green			
Albertsons #2018	Bakery	Kalispell	FL80666 - 4	6-Dec-2021	Routine	A+	Jesse M Green			
Tamarack Alehouse & Grill	Food Service	Lakeside	FL43900 - 1	6-Dec-2021	Routine	A+	Jossolyn Becker			
Caveman Protein	Mobile (Trailer)	Whitefish	FS314837 - 7	6-Dec-2021	Routine	A+	Danielle Peirce			
MacKenzie River Pizza North Hwy 93	Bar	Kalispell	FL307059 - 2	6-Dec-2021	Routine	A-	Danielle Peirce			
Cowgirl Coffee Van	Mobile (Van)	Whitefish	FS304856 - 7	7-Dec-2021		N/A	Danielle Peirce			
Cowgirl Coffee On the Road	Mobile (Trailer)	Columbia Falls	FS44453 - 7	7-Dec-2021	Routine	N/A	Danielle Peirce			
Krispy Kreme Doughnuts	Food Service	Kalispell	FL311052 - 1	7-Dec-2021		A+	Darin Woeppel			
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Flathead City-County Environmental Health Services Monthly Food Purveyors Inspection Report

Establishment	Facility	City	License	Date	Purpose	Grade	Inspector
Subway Columbia Falls	Food Service	Columbia Falls	FL311025 - 1	7-Dec-2021	Routine	A-	Jossolyn Becker
Vaqueros Restaurant	Food Service	Columbia Falls	FL19257 - 1	7-Dec-2021	Routine	C+	Jossolyn Becker
Vaqueros Restaurant	Bar	Columbia Falls	FL19257 - 2	7-Dec-2021	Routine	A+	Jossolyn Becker
McDonald's (Evergreen)	Food Service	Kalispell	FL312782 - 1	7-Dec-2021	Routine	A+	Danielle Peirce
Papa Johns Pizza	Food Service	Kalispell	FL317489 - 1	7-Dec-2021	Follow-Up	A+	Danielle Peirce
NickerBokker Pizza	Food Service	Kalispell	FL318773 - 1	7-Dec-2021	Routine	A+	Danielle Peirce
Magic Diamond II	Bar	Kalispell	FL14182 - 2	7-Dec-2021	Routine	A+	Danielle Peirce
Rebel Roots Kitchen	Food Service	Whitefish	FS313659 - 1	8-Dec-2021	Routine	A+	Jossolyn Becker
Palace Bar	Bar	Whitefish	FS3087 - 2	8-Dec-2021	Routine	B+	Jossolyn Becker
Alpine Village Market	Deli	Whitefish	FL80522 - 11	8-Dec-2021	Routine	A+	Danielle Peirce
Folklore Coffee Co by Ascend Coffee	Food Service	Whitefish	FL319027 - 1	8-Dec-2021	Routine	A-	Danielle Peirce
Chopp Shoppe	Meat Market	Whitefish	FL318871	8-Dec-2021	Routine	A+	Danielle Peirce
Mama Blancas	Food Service	Whitefish	FL309961 - 1	8-Dec-2021	Routine	A-	Jossolyn Becker
Glacier Grill	Food Service	Coram	FL315565 - 1	8-Dec-2021	Routine	A+	Darin Woeppel
Huckleberry Patch, The	Food Service	Hungry Horse	FL43342 - 1	8-Dec-2021	Routine	N/A	Darin Woeppel
Montana Wildflour	Catering	Whitefish	FS315452	9-Dec-2021	Routine	A+	Jossolyn Becker
Montana Wildflour	Wholesale	Whitefish		9-Dec-2021	Pre-Operational	N/A	Jossolyn Becker
Lucky Logger Kalispell	Bar	Kalispell	FL80378 - 2	9-Dec-2021		A+	Darin Woeppel
Lucky Lil's Casino of Kalispell	Tavern/Bar	Kalispell	FL317326 - 2	9-Dec-2021	Routine	A+	Darin Woeppel
5 Sparrows Brand	Wholesale Mfg.	Kalispell	FM318052	9-Dec-2021	Routine	Α	Jesse M Green
Chinatown Restaurant	Food Service	Kalispell	FS13823 - 1	9-Dec-2021	Routine	B+	Jesse M Green
Buffalo Café, Inc	Food Service	Whitefish	FL0880 - 1	9-Dec-2021	Routine	A+	Danielle Peirce
McDonald's (North)	Food Service	Kalispell	FL312781 - 1	9-Dec-2021	Routine	A+	Danielle Peirce
Farmhouse Inn & Kitchen	Food Service	Whitefish	FL317104 - 1	9-Dec-2021	Routine	N/A	Danielle Peirce
Sassy Sauces and Such	Food Mfg.	Lakeside	FM317688	9-Dec-2021	Routine	N/A	Jossolyn Becker
Sassy Sauces and Such	Retail Mfg.	Lakeside	FS307519 - 6	9-Dec-2021	Routine	N/A	Jossolyn Becker
Slammin Jams	Wholesale Mfg.	Kalispell	FM312269 - 13	10-Dec-2021	Routine	A+	Jossolyn Becker
Slammin Jams	Retail Mfg.	Kalispell	FS310985 - 6	10-Dec-2021	Routine	A+	Jossolyn Becker
Third Street Market	Store	Whitefish	FL313971	10-Dec-2021	Routine	Α	Darin Woeppel
Trovare	Food Service	Whitefish	FL315569-1	10-Dec-2021	Routine	A+	Darin Woeppel
Copper Mountain Coffee #2	Food Service	Kalispell	FS317148 - 1	10-Dec-2021	Routine	A+	Jesse M Green
Aces Casino	Bar	Kalispell	FL306474 - 2	10-Dec-2021	Routine	A+	Jesse M Green
Baskin Robbins Ice Cream	Food Service	Kalispell	FS11301 - 1	10-Dec-2021	Routine	A+	Jesse M Green
Red Lion Hotel Kalispell	Food Service	Kalispell	FL43633 - 1	12-Dec-2021	Routine	Α	Danielle Peirce
On Your Way 102	Food Service	Kalispell	F84721 - 1	13-Dec-2021	Follow-Up	A-	Danielle Peirce
Vics Market / Midway Mini Mart	Food Service	Whitefish	F6057-1	13-Dec-2021	Routine	Α	Darin Woeppel
Great Escape Coffee Company	Food Service	Kalispell	FS312378 - 1	13-Dec-2021	Routine	A-	Darin Woeppel
Vics Market / Midway Mini Mart	Store	Whitefish	F6057-9	13-Dec-2021	Routine	A+	Darin Woeppel

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Flathead City-County Environmental Health Services

Monthly Food Purveyors Inspection Report

Establishment	Facility	City	License	Date	Purpose	Grade	Inspector
Rivals Sports Bar	Bar	Kalispell	FL318801 - 2	13-Dec-2021	Routine	В	Danielle Peirce
Mudman Burgers Kalispell	Food Service	Kalispell	FL317147 - 1	13-Dec-2021	Routine	A+	Danielle Peirce
Gold Dust Casino	Bar	Kalispell	FS15290 - 2	14-Dec-2021	Routine	A-	Darin Woeppel
Little Caesars West	Food Service	Kalispell	FL310106 - 1	14-Dec-2021	Routine	A-	Darin Woeppel
Zip Trip #41	Store	Kalispell	FS80946 - 9	14-Dec-2021	Routine	Α	Jossolyn Becker
Vaqueros Restaurant	Food Service	Columbia Falls	FL19257 - 1	14-Dec-2021	Follow-Up	A+	Jossolyn Becker
Zip Trip #40	Store	Kalispell	FS80949 - 9	14-Dec-2021	Routine	A+	Jossolyn Becker
Natural Grocers Kalispell	Store	Kalispell	FL82350 - 9	14-Dec-2021	Routine	A+	Danielle Peirce
Friske Beans Espresso	Food Service	Columbia Falls	FS316928 - 1	15-Dec-2021	Routine	A+	Jesse M Green
Graze Charcuterie Montana	Retail Mfg.	Whitefish	FS318573	16-Dec-2021	Routine	A-	Danielle Peirce
Pho 888	Food Service	Kalispell	FL315223 - 1	16-Dec-2021	Routine	Α	Danielle Peirce
Harbor Grille	Food Service	Lakeside	FL314934 - 1	17-Dec-2021	Routine	С	Jossolyn Becker
Nickel Charlies	Food Service	Kalispell	FL10080 - 1	17-Dec-2021	Routine	Α	Danielle Peirce
Nickel Charlies	Bar	Kalispell	FL10080 - 2	17-Dec-2021	Routine	B+	Danielle Peirce
Roshi Sushi	Retail Mfg	Kalispell	FS312558	20-Dec-2021	Routine	A+	Danielle Peirce
US Foods Chef'Store	Retail Store	Kalispell	FL84715-9	20-Dec-2021	Routine	A+	Jossolyn Becker
Woody's Country Store	Food Service	Kalispell	FL6994 - 1	21-Dec-2021	Routine	A+	Jossolyn Becker
Rightontrek	Wholesale	Kalispell		21-Dec-2021	Pre-Operational	N/A	Danielle Peirce
Gold Bar	Bar	Kalispell	FS12448 - 2	21-Dec-2021	Routine	A+	Darin Woeppel
Lucky Lil's Lounge & Gaming Parlor	Bar	Kalispell	FL8769 - 2	21-Dec-2021	Routine	A+	Darin Woeppel
Grouse Mountain Lodge	Food Service	Whitefish	FL301490 - 1	21-Dec-2021	Routine	C+	Danielle Peirce
Ciao Mambo	Food Service	Whitefish	FL16857 - 1	21-Dec-2021	Routine	A+	Danielle Peirce
Stumptown Winebar	Food Service	Whitefish	FL318867 - 1	22-Dec-2021	Routine	N/A	Darin Woeppel
Stumptown Winebar	Tavern	Whitefish	FL318867 - 2	22-Dec-2021	Routine	N/A	Darin Woeppel
Tien 's Place Oriental Dining	Food Service	Columbia Falls	FL14823 - 1	22-Dec-2021	Routine	A+	Jossolyn Becker
Taco Bell (North)	Retail Food	Kalispell		22-Dec-2021	Pre-Operational	N/A	Jossolyn Becker
Three Forks Grille	Food Service	Columbia Falls	FL45420 - 1	22-Dec-2021	Routine	Α	Jossolyn Becker
No Name Bar	Food Service	Kalispell		23-Dec-2021	Liquor Licensing	N/A	Danielle Peirce
Pho Ly Asian Cuisine	Food Service	Kalispell	FS307033 - 1	23-Dec-2021	Routine	A+	Danielle Peirce
Kila Pub, The	Food Service	Kila	FL316965 - 1	27-Dec-2021	Routine	N/A	Danielle Peirce
Miss Patti Cakes	Bakery	Kalispell	FS44919 - 4	28-Dec-2021	Routine	A+	Danielle Peirce
Grouse Mountain Lodge	Food Service	Whitefish	FL301490 - 1	28-Dec-2021	Follow-Up	A+	Danielle Peirce
Higher Healths	Retail Mfg.	Columbia Falls	F319148-6	29-Dec-2021	Ad-Hoc Routine	N/A	Darin Woeppel
Montana Nugget Casino	Food Service	Kalispell	FL15175 - 1	29-Dec-2021	Routine	A-	Danielle Peirce

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Summary of Low Grades (C+ or Lower) for December 2021

Establishment – Vaqueros (Columbia Falls)

Inspection Date: December 7, 2021

Inspection Type: Routine Grade: C+Follow-Up Date: December 14, 2021 Grade: A+

Enforcement Action: Follow Up Inspection

Inspection Deficiencies & Details:

(A) Cross-contamination of raw animal products that require a lower cook temperature with those that require a higher cooking temperature not adequately prevented in storage, preparation, holding, and display.

RISK FACTOR / INTERVENTION

Corrected on site

Recommended Resolution - Raw animal products must be stored according to final minimum required cooking temperature with items requiring higher temperatures stored away from or below those requiring lower temperatures. This deficiency must be corrected within 3 days.

Observations and Corrective Actions - Observed chicken stored above beef in prep cooler; COS= chicken and beef switched when notified

(A) Cross-contamination of cooked and/or ready-to-eat foods with raw animal products not adequately prevented in storage, preparation, holding, and display.

PRIORITY

PRIORITY

RISK FACTOR / INTERVENTION

Corrected on site

Recommended Resolution - All raw animal products (poultry, beef, pork, eggs, etc.) must be stored or prepared in a manner that prevents cross-contamination with ready-to-eat foods by storing them on separate shelves, in separate units, or having a partition between them. Additionally, raw animal products must be prepared using separate cleaned and sanitized equipment, in different locations or at different times than ready-to-eat foods. This deficiency must be corrected within 3 days.

Observations and Corrective Actions - Observed steak stored above shredded cheese; COS=steak moved to bottom shelf.

(A & B) Cold time/temperature control for safety food not adequately temperature controlled.

PRIORITY

RISK FACTOR / INTERVENTION

Corrected on site

Recommended Resolution - Except for raw shell eggs, which can be held at 45°F, potentially hazardous/time-temperature control for safety food that is being held cold must be held at 41°F or lower. This deficiency must be corrected within a maximum of 3 days

Observations and Corrective Actions - Observed cheese in ice bucket at 47-51. COS= new ice bucket added to keep cheese at proper temp.

(A-E) TCS foods not thawed by approved methods.

Recommended Resolution - Time/temperature control for safety food shall be thawed under refrigeration that maintains the food temperature at 5° C (41° F) or less; completely submerged under running water at a water temperature of 21° C (70° F) or below; as part of a cooking process; reduced oxygen packaged fish that bears a label indicating that it is to be kept frozen until time of use shall be removed from the reduced oxygen environment. This deficiency must be corrected within a maximum of 90 days.

Observations and Corrective Actions - Thawing chicken on counter, and in standing cold water. Discussed proper thawing methods

(A,B) Food stored in an improperly such as on the floor, next to a hand washing sink or in an uncovered container.

REPEAT

Recommended Resolution - Food shall be protected from contamination by storing the food: in a clean, dry location; where it is not exposed to splash, dust, or other contamination; and at least 15 cm (6 inches) above the floor. This deficiency must be corrected within a maximum of 90 days.

Observations and Corrective Actions - Bags of bread (buns) laying on the floor in the walk in freezer

Grouse Mountain Lodge-Food Service (Whitefish)

Inspection Date: Tuesday, December 21, 2021

Inspection Type: Routine Grade: C+ Follow-Up Date: Tuesday, December 28, 2021 Grade: A+

Enforcement Action: Follow-up Inspection

Inspection Deficiencies & Details:

Sanitizer wiping cloth bucket not readily available during operation OR made at a weak concentration.

PRIORITY

Corrected on site

Recommended Resolution - Sanitizer at an effective concentration for sanitizing equipment in place and for wiping up food spills must be available at all times of operation. This deficiency must be corrected within a maximum of 3 days.

Observations and Corrective Actions - No sanitizer buckets were available at start of inspection. Food handling was taking place at the time of inspection. COS: Made sanitizer buckets upon request.

Inadequate hot holding of PHF/TCS food.

PRIORITY

Corrected on site

Recommended Resolution - Except for roasts, which can be held at 130°F after cooking, potentially hazardous/time-temperature control for safety food that is being held hot must be held at 135°F or above. This deficiency must be corrected within a maximum of 3 days

Observations and Corrective Actions - Observed rice (122 degrees) and queso (76 degrees) in alto sham. Needs to be above 135. COS: Reheated rice on stove top to above 165 and queso removed.

Foods improperly reheated for hot holding.

PRIORITY

Corrected on site

Recommended Resolution - Food that is cooked, cooled, and reheated for hot holding shall be reheated so that all parts of the food reach a temperature of at least 165°F for 15 seconds within 2 hours. Ready-to-eat commercially processed and packaged food that is heated for hot holding must be heated so that all parts of the food reach a temperature of at least 135°F within 2 hours. This deficiency must be corrected within a maximum of 3 days

Observations and Corrective Actions - Observed a few items in steam table that had not been reheated to 165 before being placed in hot holding. COS: Removed items that were being reheated and reheated on stove top.

Equipment food-contact surfaces not clean to sight or touch.

PRIORITY FOUNDATION

Corrected on site

Recommended Resolution - Equipment food-contact surfaces and utensils shall be clean to sight and touch. This deficiency must be corrected within a maximum of 10 days.

Observations and Corrective Actions - Can opener blade was visibly dirty. COS: Ran can opener through dishwasher.

HACCP plan not submitted prior to engaging in activity where required.

Recommended Resolution - Before engaging in an activity that requires a HACCP plan, a permit applicant or permit holder shall submit to the regulatory authority for approval a properly prepared HACCP plan as specified under § 8-201.14 and the relevant provisions of this Code. This deficiency must be corrected within a maximum of 90 days.

Observations and Corrective Actions - Facility is doing sous vide; no HACCP plan on record for this special process.

Establishment – Harbor Grille (Lakeside)

Inspection Date: December 17, 2021

Inspection Type: Routine **Grade:** C **Follow-Up Date:** January 6, 2021 **Grade:** A

Enforcement Action: Follow Up Inspection

Inspection Deficiencies & Details:

(A-E) Direct hand contact when handling ready-to-eat foods.

PRIORITY

RISK FACTOR / INTERVENTION

Corrected on site

Recommended Resolution - Food employees may not contact exposed, ready-to-eat food with their bare hands and shall use suitable utensils such as deli tissue, spatulas, tongs, single-use gloves, or dispensing equipment. Must be corrected within 3 days.

Observations and Corrective Actions - Observed employee plating burger garnishes with bare hands; COS= stopped employee discussed need to wear gloves anytime we are handling RTE foods

Cross-contamination of cooked and/or ready-to-eat foods with raw animal products not adequately prevented in storage, preparation, holding, and display.

PRIORITY

RISK FACTOR / INTERVENTION Corrected on site

Recommended Resolution - All raw animal products (poultry, beef, pork, eggs, etc.) must be stored or prepared in a manner that prevents cross-contamination with ready-to-eat foods by storing them on separate shelves, in separate units, or having a partition between them. Additionally, raw animal products must be prepared using separate cleaned and sanitized equipment, in different locations or at different times than ready-to-eat foods. This deficiency must be corrected within 3 days.

Observations and Corrective Actions - Shell eggs stored above grated parmesan cheese in walk in cooler; COS= eggs moved to bottom shelf

(A-E) Concentration for manual (triple-sink) or mechanical (low-temperature) dish/utensil sanitizing is not maintained strong enough to effectively sanitize.

PRIORITY

RISK FACTOR / INTERVENTION

Corrected on site

Recommended Resolution - Sanitizer must be maintained at or above minimum required concentrations for sanitizing as follows: chlorine in water above 100°F must be at least 50 parts per million (ppm); chlorine in water less than 100°F must be at least 100ppm; iodine must be at least 12.5 mg/L; quaternary solutions must be maintained per manufacturers instructions or at least 200ppm if not known; sanitizers other than chlorine, iodine or quaternary solution according to EPA registered instructions. This deficiency must be corrected within a maximum of 3 days

Observations and Corrective Actions - Low temperature dishwasher not sanitizing, testing at 0 ppm, Dishwasher is also high temperature but booster is leaking water and temperature did not get above 130 at dishlevel. COS= hose was not all the way in sanitizer and gray adapter was floating and not connected to hose. Connected hose and adapter and observed dishwasher at \sim 50 ppm

(B2) Sell-by date on dairy products has passed.

PRIORITY

RISK FACTOR / INTERVENTION

Corrected on site

Recommended Resolution - In accordance with Department of Livestock regulations (ARM 32.8.202) dairy products may not be offered for public consumption after the sell-by date. This deficiency must be corrected within a maximum of 3 days

Observations and Corrective Actions - Observed 2 gallons of milk in dessert cooler with sell by date of 12/12/21; COS=discarded when notified.

(A, B) Inappropriate cooling methods used.

PRIORITY FOUNDATION

RISK FACTOR / INTERVENTION

Corrected on site

REPEAT

Recommended Resolution - Cooling shall be accomplished in accordance with the time and temperature criteria by using one or more of the following methods based on the type of food being cooled: placing the food in shallow pans; separating the food into smaller or thinner portions; using rapid cooling equipment; stirring the food in a container placed in an ice water bath; using containers that facilitate heat transfer; adding ice as an ingredient; other effective methods. Containers must be arranged to facilitate maximum heat transfer and be loosely covered or uncovered if protected from overhead contamination. This deficiency must be corrected within a maximum of 10 days.

Observations and Corrective Actions - Observed marinara and sausage gravy cooling in walk in, covered with lids; COS=removed lids and discussed proper cooling methods for rapid cooling.

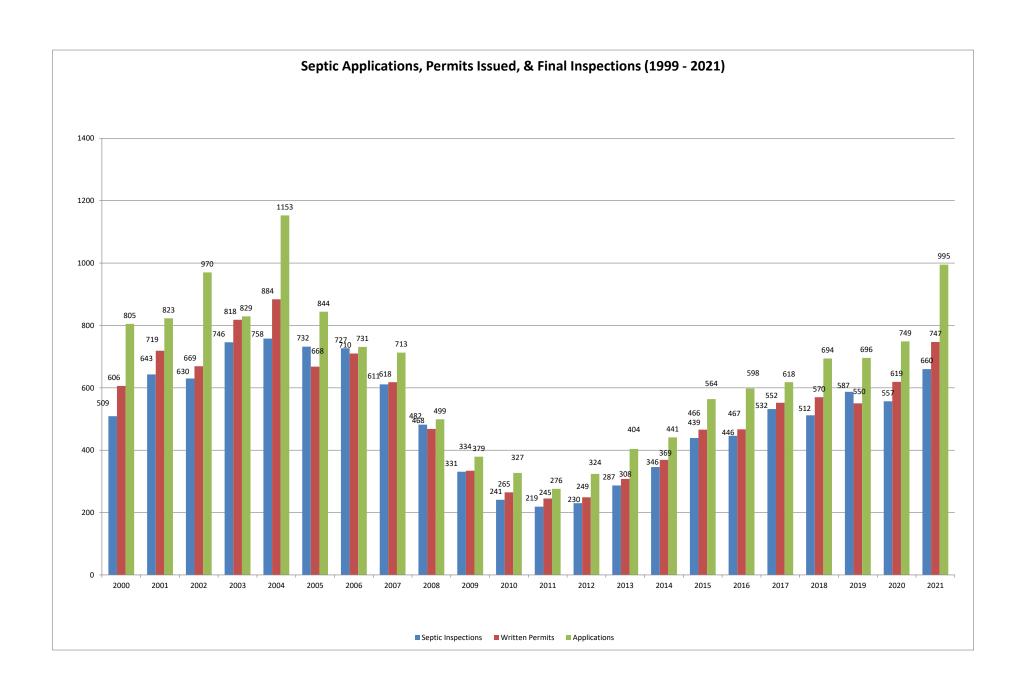
(B) Handwashing sink used for purposes other than handwashing.

PRIORITY FOUNDATION

Corrected on site

Recommended Resolution - A handwashing sink may not be used for purposes other than handwashing. This deficiency must be corrected within a maximum of 10 days.

Observations and Corrective Actions - Observed tongs and spatula in hand sink, server is dumping drinks in other handsink; COS=removed when notified and discussed only handwashing may occur in handsinks



Community Health Board of Health Report December 2021

				·			Immunizat	tions							
		12 Mo.	12 Mo.												
		Running	Running												
	Dec-21	Avg.	Total	Nov-21	Oct-21	Sep-21	Aug-21	Jul-21	Jun-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21	Dec-20
Total Visits	151	128	1,541	192	292	191	263	139	126	110	59	48	54	65	194
Other															
Immunizations	133	176	2,112	248	138	297	430	194	186	170	109	79	86	105	318
Influenza	77	35	421	111	233	81	0	0	2	2	5	0	10	12	76
Blood Draws	8	13	153	4	6	14	10	13	15	11	12	47	7	8	10
We did roughly 1,	We did roughly 1,308 Flu shots on 10/6/2021														
	WIC 12 Month Running														
	Dec-21		~	Nov-21	Oct-21	Sep-21	Aug-21	Jul-21	Jun-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21	Dec-20
Columbia Falls	0	Av.		0	000-21	З ер-21	Aug-21 0	0	0	0	Αρι-21	0			
Kalispell	1000	100		1016	1002	1007	995	1010	1003	1000	971	994	1008	_	992
Total	1000	100		1016	1002	1007	995	1010	1003	1000	971	994	1008		992
	Participants Completing Requirements Online														
Total	32	2:	2	15	14	18	9		22	4	25	12	16	12	11
					Hea	althy Mont	ana Famili	es (Home \	/isiting)				•		
		12 Month	Running												
DAT (5) (1	Dec-21	Av		Nov-21	Oct-21	Sep-21	Aug-21	Jul-21	Jun-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21	Dec-20
PAT/FYI	87%	91		94%	100%	78%	82%	92%	98%	99%	100%	99%	94%	83%	78%
MAP	13%	21	%	13%	0%	23%	23%	23%	23%	23%	23%	23%	23%	23%	23%
					المامدا	Mantan	a Familiae	Incommin	- Defermele						
	1	12 Month	Running		пеан	ny iviontan	a ramilles	incommin	Referrais					l	
	Dec-21	Av		Nov-21	Oct-21	Sep-21	Aug-21	Jul-21	Jun-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21	Dec-20
Referrals	7	10		7	7	23	7	11	11	14	19	37	21	11	12
Enrollments	0	3		2	0	3	1	0	2	6	4	3	6	3	2
Agencies	2	4		2	2	6	3	4	5	3	5	4	6	5	3
Agency															
Outreach															
Performed	3	3		2	2	2	2	6	3	5	3	6	6	1	0

Communicable Disease

	May-22	12 Mo. Running Avg.	12 Mo. Running Total	Apr-22	Mar-22	Feb-22	Jan-22	Dec-21	Nov-21	0ct-21	Sep-21	Aug-21	Jul-21	Jun-21	May-21
Campylobacteriosis	2	1.58	19	1	2	1		2	2	4	1	2	2	2	
Chlamydia	28	22	267	26	29	24	22	30	17	17	19	29	24	15	15
Coccidioidomycosis		0.08	1		1										
Cryptosporidiosis		0.08	1	1											
Shiga toxin-producing E. coli (STEC)		0.42	5		1		1	1			1	1			
Ehrlichiosis		0.08	1									1			
Giardiasis		0.75	9	1			2	1		1			2	2	
Gonorrhea	1	2.83	34	3	1	5	2	3	4	3	2	3	4	3	1
Haemophilus Influenzae invasive		0.08	1				1								
Hepatitis A		0.00	0												
Hepatitis B chronic	2	0.17	2							1		1			
Hepatitis B acute		0.00	0												
Hepatitis C acute	2	0.25	3		1			1				1			
Hepatitis C chronic	7	4.33	52	4	3	7	2	7	2	2	7	4	6	3	5
HIV		0.00	0												
Influenza hospitalization	1	2.25	27	1	13	10	3								
Influenza death		0.00	0												
Lead Poisoning		0.33	4	2								2			
Legionellosis		0.00	2						2						
Listeria		0.00	0												
Lyme Disease		0.00	0												
Malaria		0.08	1											1	
Pertussis		0.00	0												
Salmonellosis	3	0.42	5	3				1				1			
Shigellosis		0.17	2									1	1		
Spotted Fever Rickettsiosis		0.00	0												
Streptococcus pneumoniae, invasive		0.42	5					1	2	1			1		
Streptococcal Toxic Shock Syndrome		0.00	0												
Syphilis		0.67	8	1		1		1	1	1	1	1	1		
Transmissible spongiform encephalopathies		0.17	2	1								1			
Tuberculosis (active)		0.00	0												
Tuberculosis (latent)		0.83	10	1		1				5		1	2		
Varicella (chickenpox)	1	0.17	2		1										1
Vibriosis		0.25	3					1					2		
Month total	47		466	45	52	49	33	49	30	35	31	49	45	26	22

Population Health Board of Health Report May 2022



TOBACCO USE PREVENTION PROGRAM

FY21 CALLS TO MONTANA TOBACCO QUITLINE

	Jul 21	Aug 21	Sep 21	Oct 21	Nov 21	Dec 21	Jan 22	Feb 22	Mar 22	Apr 22	May 22	Jun 22	FY 22 Total
FLATHEAD COUNTY	9	13	10	7	4	11	13	10	10	8			95
STATEWIDE	130	128	127	127	113	119	155	96	124	138			1,257
% TOTAL CALLS IN MONTANA	6.92	10.15	7.87	5.51	3.53	7.26	7.45	7.73	7.77	7.56			

MONTANA CANCER SCREENING PROGRAM

FY21 MONTANA CANCER SCREENING PROGRAM - Goal 660

	Jul 21	Aug 21	Sep 21	Oct 21	Nov 21	Dec 21	Jan 22	Feb 22	Mar 22	Apr 22	May 22	Jun 22	FY 22 Total
SCREENINGS COMPLETED	9	20	24	51	43	26	33	36	48	44	41		375
% OF GOAL	1%	4%	8%	16%	22%	26%	31%	37%	44%	51%	57%		57%
# PATIENT NAVIGATION ENROLLED	3	12	14	23	26	17	3	17	24	15	17		159
BREAST SCREENING DIAGNOSED AS CANCER	1	0	0	1	0	1	1	0	0	0	0		4
CERVICAL SCREENING FOR FY21 (PAP, HPV, COLPO)	10	28	37	20	59	41	19	47	63	47	43		414
BREAST SCREENING FY21 (CBE, MAMMO, DIAGN, ETC)	12	12	17	80	33	28	60	36	50	60	50		438
CERVICAL SCREENING DIAGNOSED AS CANCER	0	0	0	0	0	0	0	2	0	0	0		2

AMERICAN INDIAN BREAST AND CERVICAL – GOAL 40													
	Jul 21	Aug 21	Sep 21	Oct 21	Nov 21	Dec 21	Jan 22	Feb 22	Mar 22	Apr 22	May 22	Jun 22	FY 22 Total
SCREENED	0	0	0	1	1	0	1	1	1	0	3		8
% OF GOAL													20%

^{*}If a patient has had both a cervical screening and a breast screening they will count as only 1 in our overall number to the state.

SAFE KIDS SAFE COMMUNITIES

CAR SEATS															
	May 22	12Mo. Running Average	12Mo. Running Total	Apr 22	Mar 22	Feb 22	Jan 22	Dec 21	Nov 21	Oct 21	Sept 21	Aug 21	July 21	Jun 21	May 21
CHECKED (Not Provided By FCCHD)	17	8.16	98	26	5	3	4	4	7	8	10	3	11	6	11
FREE OR REDUCED	9	4.5	54	4	5	2	3	3	2	8	3	3	9	3	9
ALIVE AT 25															
	May 22	12Mo. Running Average	12Mo. Running Total	Apr 22	Mar 22	Feb 22	Jan 22	Dec 21	Nov 21	Oct 21	Sep 21	Aug 21	July 21	Jun 21	May 21
NUMBER OF STUDENTS	12	8	96	0	11	9	1	12	15	12	0	13	8	8	7

SHARPS PROGRAM

FY22 SHARPS DISTRIBUTIONS

	July 21	Aug 21	Sept 21	Oct 21	Nov 21	Dec 21	Jan 22	Feb 22	Mar 22	Apr 22	May 22	FY 22 Total
NUMBER OF PHARMACIES VISITED EACH MONTH	14	14	14	14	14	14	14	14	14	14	14	
NUMBER OF SHARPS CONTAINERS GIVEN	200	115	204	195	278	138	145	160	165	215	190	2,005
NUMBER OF SHARPS CONTAINERS TAKEN TO LANDFILL	159	121	188	108	247	185	129	144	158	173	127	1,739

FCCHD Board of Health Report (1/18/2022) Mosquito Control

The Flathead County Mosquito Control District experienced a fairly typical season during 2021, despite overall drier than normal conditions. During the field season, which ran from March 1 through September 13, mosquito control personnel conducted 7,321 site inspections and applied 969 larvicide treatments, covering an area of 1,303.92 acres. Personnel also applied 9 adulticide treatments, covering 216.4 acres.

Montana experienced minimal West Nile Virus activity in 2021, with 7 WNV-positive mosquito pools detected, and no human or equine cases reported. No WNV was detected within Flathead County.

The Montana Department of Environmental Quality has issued a new Montana Pesticide Discharge Elimination System General Permit, which will remain in effect through 2026. District operations are covered under this permit and as a condition of compliance the district must submit its Pesticide Discharge Management Plan (PDMP) to the Board of Health for annual review and approval. A summary of proposed revisions and draft PDMP have been submitted for your consideration.

The district sold two Argo amphibious ATVs at auction in December and is currently in the process of purchasing a side-by-side UTV to replace them. We are also working through the bidding and purchase process for a new truck for the program. Due to supply issues, the anticipated timeframe for receiving these vehicles is several months.

Mosquito Control Personnel are preparing for the coming field season, which will begin in March, and hope to soon begin recruiting and hiring seasonal staff.

Thank you,

Jake Rubow

Pesticide Discharge Management Plan Flathead County Mosquito Control District

Summary of Proposed Changes, 2022

In accordance with the requirements of the Montana Pesticide Discharge Elimination System General Permit administered by the Montana Department of Environmental Quality, the Flathead County Mosquito Control District must conduct an annual review of its Pesticide Discharge Management Plan (PDMP) and submit each annual revision to the Flathead County Board of Health for approval. The district proposes the following changes be adopted and approved for the 2022 PDMP.

- 1. Footer: Amend the revision date upon approval.
- 2. Page 5, Section 3. c. Aerial Operations: Change the section language to reflect the program's use of multiple certified UAS pilots/licensed aerial applicators.
- 3. Page 5, Section 3. d. General Statement: Update the AMCA Best Practices for Integrated Mosquito Management description to reflect the most recent, 2021, version.
- 4. Page 8, Section 4 Schedules and Procedures: Delete the table provision stating that notice of planned adulticide operations will be posted on the mosquito control program website. This has proven impractical due to weather variability, which often drastically impacts the timing and/or possibility of applications. All adulticide treatments are applied with the permission of the affected landowners, who are notified directly.

Pesticide Discharge Management Plan Flathead County Mosquito Control District

Mailing address: Flathead County MCD

1035 1st Ave West Kalispell, MT 59901

Phone: 406-751-8140

406-751-8145

Summary: This Pesticide Discharge Management Plan has been written to comply with the requirements imposed by the Sixth Circuit Court January 9, 2009, decision to vacate the Environmental Protection Agency's (EPA) 2006 National Pollutant Discharge Elimination System (NPDES) Pesticides Rule in National Cotton Council of America v. EPA, 553 F.3d 927 (6th Cir., 2009). Therefore, pesticide applications require permits under NPDES programs in all state and federal permitting programs. The Montana Department of Environmental Quality (DEQ) has issued a permit for pesticide 'discharge'. This permit imposes certain reporting requirements, which include the formulation of a pesticide discharge management plan that must be made available to the public upon request under the Freedom of Information Act.

Plan Organization (by page number)

Summary	1
Pesticide Discharge Management Team	2
Pest Management Area Description and Habitats	3
Control Measures to Minimize Discharges	5
West Nile Virus flowchart	7
Schedules and Procedures	8
Signature Page	9

1. Pesticide Discharge Management Team

1. a. Person responsible for managing pests: Jake Rubow

1. b. Persons responsible for developing and managing PDMP:

Jake Rubow Brock Boll Flathead City-County Board of Health

1. c. Persons responsible for developing, revising, and implementing corrective actions and other effluent limitation requirements:

Jake Rubow Brock Boll

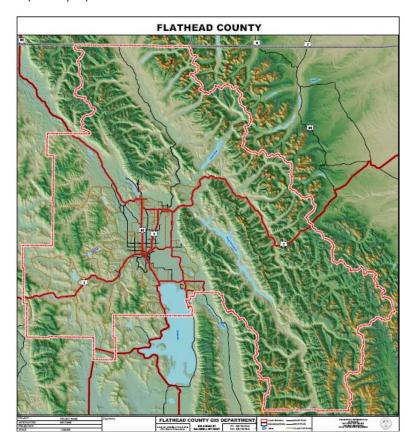
1. d. Persons responsible for overseeing pesticide applications:

Jake Rubow Brock Boll

2. Pest Management Area Description and Habitats

2. a. Flathead River and Management Areas

The Flathead County Mosquito Control District was created August 3, 2005, by the Board of Commissioners' adoption of Resolution # 1849B. Boundaries for the District include all of Flathead County with the exception of Glacier National Park, United States Forest Service Property and private property that owners have specifically requested be excluded from control activities.



Flathead County is trisected from North to South by three primary rivers: the Flathead River, the Whitefish River, and the Stillwater River. The Swan River enters Flathead County from the South, meanders west and enters Flathead Lake at Bigfork. Smaller creeks include Ashley Creek, Trumble Creek, Patrick Creek and Spring Creek.

Spring snowmelt affects river and creek levels at different times, frequencies, and rates. Localized spring rain and snowfall can raise river and stream levels quickly. Typically, high water crests in early June. As Flathead Lake nears full pool, the main stem of the Flathead River backs up to the confluence with the Stillwater River, spilling water into low-lying areas of the lower valley. During periods of high ground water with above average snowpack, low areas throughout the valley floor experience emerging ground water from glacial kettles. High water and flooding from the valley's rivers and streams flow into backwaters and over banks, becoming trapped and creating mosquito habitat.

Artificial mosquito habitats in Flathead County include retention and detention ponds, sewage treatment facilities, tire piles, and open containers such as buckets, wheelbarrows, abandoned hot tubs and uncovered boats. Storm drains, leaking sprinkler lines and unused wading pools also produce mosquitoes.

2. b. Pest Problem Description (target species)

Aedes vexans, commonly referred to as a floodwater mosquito, comprises about 70% of the District's total mosquito population according to Montana State University trap data (2005-2017). This species is an aggressive and opportunistic feeder. Aedes vexans is primarily considered a nuisance mosquito, but has been demonstrated to be a competent vector of West Nile Virus (WNV) and canine heartworm. Eggs from this species begin to hatch when water returns to their habitat and reaches temperatures of about 51° F. Although it has been published that eggs can lay dormant for 5-7 years, recent experience has shown this period may last much longer. Eggs are laid singly and must undergo a complete drying process before hatching.

Culex tarsalis represents the primary vector species for the potential transmission of West Nile Virus in Flathead County Montana. This species lays its eggs directly on the surface of the water in groups, called rafts. Rafts typically contain around 190 individual eggs, but may contain as many as 300. Permanent or semi-permanent areas of relatively clean water that are open to sunlight and supplied with an organic food source, such as grass, are the preferred habitat. As such, Culex tarsalis larvae are most often found in flooded areas of pastures, hay fields, parks, and overwatered lawns. These mosquitoes emerge later than most floodwater mosquito species and are typically encountered from May to September. Adult females are long-lived and can even overwinter in sheltered areas like basements or garages and lay their eggs in the spring.

Culex pipiens, larvae develop in foul water in rain barrels, catch basins, faulty cesspools, ditches, and other similar habitats. Generally known as the northern house mosquito, Culex pipiens infest houses and bite at night. Adult females pass the winter hibernating in cellars, basements, outbuildings, caves, and other places that provide protection from cold. Flight range is generally 1/2 mile or less. Culex pipiens are not common in Montana, but were found in the Flathead in 2008, and have established a persistent population. Culex pipiens is also a potential vector of West Nile Virus, and lays eggs in rafts of about 190 numerous times throughout the season.

Coquilletidia perturbans is a species specific to cattail marsh habitats. These mosquitoes do not frequently occur in most of Montana, but are common in the Flathead Valley. Coquilletidia larvae use special appendages to attach themselves to cattail stalks below the water's surface and use the hollow stalks as breathing tubes. The larvaes' positions on cattail stalks protect them from water disturbances and predators that affect the swimming larvae of other species and make them extremely difficult to find through normal larval surveillance methods. Some Coquilletidia larvae may even overwinter in a semi-dormant state while submerged. Coquilletidia perturbans can act as a vector for West Nile Virus.

These, and other, species have been identified as primary targets for control operations based on Centers for Disease Control (CDC) light trap collections, field observations and citizen complaints, which indicate high populations of these species within the District. This type of monitoring has been performed since 2006, and is the basis for determining where and when control measures will be applied. The presence of West Nile Virus is also monitored routinely, providing more information for making treatment decisions.

Focus areas for surveillance and control activities within the District are urban residential, city and county parks, recreational areas and rural residential upon request. Outreach and education about habitat reduction and bite prevention are also important focus areas, particularly for rural residents affected by large areas surrounding their properties.

3. Control Measures to Minimize Discharges

3. a. Pest Problem and Impacts

West Nile Virus, first introduced into the United States in 1999, is present in certain bird species and has been transmitted to humans and horses in the Flathead Valley. The primary vector species that can transmit the virus infest permanent or semi-permanent bodies of clean water in grassy areas (*Culex tarsalis*), or may infest polluted waters such as brackish rain barrels, storm drains, and failed septic cesspools (*Culex pipiens*). Nuisance mosquitoes infest areas along rivers, parks and some residential areas in towns. Potential health threats, quality of life issues, and potential economic impacts are a few of the reasons for implementing mosquito control in Flathead County.

3. b. Tolerance levels to trigger pesticide application

Flathead County Mosquito Control field technicians respond to complaint calls by visiting the property in question. If flying mosquitoes are present, the source of the breeding activity (water body) will be investigated. Surveillance data collected from suspected sites include GPS location, water body size, larval dip counts, larval development stages, pupal dip counts, trap counts (from flying adults present on site) and pertinent comments.

3. c. Aerial Operations

Aerial application is a well-established and widely utilized practice in mosquito control due to the efficacy and efficiency of such treatments. Conventional aircraft are well suited to treating large, continuous areas, but are less suited to many of the treatment areas within the Flathead County Mosquito Control District. Unmanned Aircraft Systems (UASs), or "drones," represent versatile technologies that allow Flathead County Mosquito Control to incorporate the benefits of aerial operations in a cost-effective manner better suited to our treatment areas.

The Flathead County Mosquito Control District operates UASs for the purposes of monitoring flooding, examining the condition of known mosquito production sites, and locating production sites in areas of mosquito activity, as well as treating designated areas with low-toxicity larvicides or pupicides. UAS treatments are applied with properly calibrated equipment, and in full compliance with all federal and state regulations, as well as product label rates and restrictions. Such treatments are restricted to the application of larvicides and pupicides, with adulticide applications made via ground-based equipment. A staff UAS pilot licensed through the Federal Aviation Administration (FAA) conducts all flights, all aircraft are registered with the FAA, and all operations comply with FAA and airspace requirements. No flights or treatment applications shall be made to or over private property without landowner permission. Any and all UAS use must be consistent with this provision, but may not extend to monitoring or surveillance in any other manner, including but not limited to, law enforcement use, personal surveillance, or any other form of data/information collection inconsistent with this provision or the goals of the Pesticide Discharge Management Plan.

3. d. General Statement

Flathead County Mosquito Control follows the common practices as described in Best Management Practices for Integrated Mosquito Management: A Focused Update (American Mosquito Control Association, January 2017). General information on control and surveillance, and the definitions used in the table below can be found in this document or in the most recent version of the Montana Mosquito Control Training Manual, published by the Montana Department of Agriculture.

Commented [JR1]: Change to: "Staff UAS pilots"

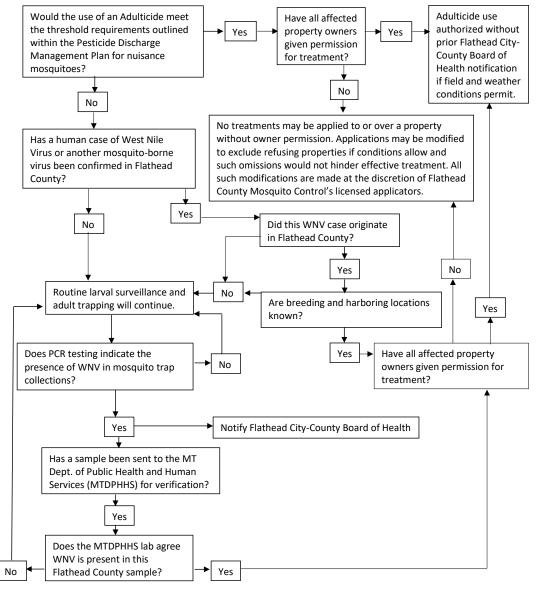
Commented [JR2]: Change to: "Best Practices for Integrated Mosquito Management (American Mosquito Control Association, November 2021)

Control Practices and Treatment Thresholds

Control Measure	Description	Applicability	Active Ingredient/ Formulation	Surveillance Method	Threshold	Application Method	Rate Determination
Source Reduction	Container control	Residential areas	N/A	Property checks, public education	Presence of water holding containers	N/A, Draining production sources	N/A
Larviciding	Use of EPA approved Larvicides	Areas of standing water known to be larval habitats of mosquitoes]	Bacillus thuringiensis S-Methoprene, Bacillus sphaericus, Spinosad Mineral Oil	Larval dipping	Presence of target species	Application with calibrated backpack or vehicle- mounted equipment	Lowest effective rate within label limits, with highest rate being used only when thick vegetation and organic material are present
Pupiciding	Use of EPA approved Pupicides	Areas of standing water found to contain mosquito pupae]	Mineral Oil	Pupal dipping	Presence of target species	Application with calibrated backpack or vehicle- mounted equipment	Lowest effective rate within label limits, with highest rate being used only when thick vegetation and organic material are present
Adulticiding (nuisance mosquitoes)	Use of EPA approved Adulticides	Used in urban and rural residential areas	Permethrin	CDC light trap	Trap Count of 150 adults per night. When weather or other conditions prevent treatment within ten days of a count, a new count will be completed to ensure that current mosquito levels warrant treatment.	Ground application w/calibrated vehicle- mounted Ultra Low Volume (ULV) equipment	Per product label and calibration
Adulticiding (vector mosquitoes)	Use of EPA approved Adulticides	Same as nuisance mosquitoes (above)	Same as nuisance mosquitoes(above)	CDC light trap, and PCR testing for the presence of West Nile Virus by Carroll College and the Montana Department of Public Health and Human Services.	Refer to Adulticide flowchart (following page)	Same as nuisance mosquitoes (above)	Same as nuisance mosquitoes (above)

Adulticide flowchart

The chart presented below defines the conditions under which adulticide treatments may be applied, and the steps followed to determine whether such treatments are necessary.



Flathead County Mosquito Control District
Pesticide Discharge Management Plan (Revised January 28, 2021) Updated upon approval

4. Schedules and Procedures

This section of the PDMP contains a list of the procedures used to implement the control measures described in Section 3 above and the schedules by which these procedures are performed. Mosquito control personnel will not access, inspect, or apply treatments to or over private property without the property owner's permission. This includes aerial inspection or treatment performed using Unmanned Aircraft Systems. If potential exists for treatment drift over neighboring properties, access and treatment permission will also be secured from all property owners who may be affected. Property owners who wish to be excluded from mosquito control activities may opt-out of treatments on the Flathead City-County Health Department website at: https://apps.flathead.mt.gov/donotspray/add.php, or by calling Flathead County Mosquito Control at (406) 751-8140 or (406) 751-8145. No applications will be made under unfavorable site or weather conditions likely to cause undesired drift or expose people to a potential treatment. All treatments are applied at the discretion of Flathead County Mosquito Control's licensed applicators and operators.

Control Method	Determination of Application Rate	Surveillance Method	Determination of Frequency of Application	Spill Prevention Procedures and Schedule	Application Equipment Calibration Schedule	Application Equipment Maintenance Schedule	Environmental Condition Assessment Procedure
Source Reduction	N/A	Dipping	N/A	N/A	N/A	N/A	Property owner/manager consulted
Larvicide	Lowest effective label rate. The presence of thick vegetation or heavy organic material in the water may necessitate use of the highest allowable rates.	Dipping/larval counts	Applications made when thresholds are exceeded and previous treatment is no longer effective.	Daily pre-trip inspections of equipment, mandatory chemical application training includes spill procedures.	Flow rate calibrated to employee and product at start of season. GPS utilized to monitor MPH travel rates on wheeled applicators and UAS.	Daily pre-trip inspections of equipment for leaks, cracks and operation. Pre-season inspections and repairs as required. Down equipment board denotes required repairs.	Onsite weather evaluations by trained applicators and operators. No applications made if wind is excessive. No application of mineral oil to areas of potential discharge into the Whitefish River.
Pupicide	Same as Larvicides	Dipping/pupal counts	Same as Larvicides	Same as Larvicides	Same as Larvicides	Same as Larvicides	Same as Larvicides, with the exception of areas of potential discharge into the Whitefish River where the application of oils is prohibited.
Adulticide	Calibrated rate does not exceed label application limits,	CDC Light Trap counts	Applications made when thresholds are exceeded, and in accordance with label limitations. All applications will be made at the discretion of Flathead County Mosquito Control's licensed applicators.	Daily pre-trip inspections of equipment, spill kits on vehicles, mandatory chemical application training includes spill procedures.	Pre-season certified calibration and subsequent use/acre evaluations.	Daily pre-trip inspections of equipment for leaks, cracks and operation. Pre-season inspections and repairs as required. Equipment log denotes required maintenance and repairs.	Public notification of an adulticide application will be posted on the mosquito control website at Elatheadhealth.org/Mosquito Control . GPI weather forecast monitored in advance. Onsite weather evaluations by trained applicators. No applications to areas with people present and without the consent of all affected stakeholders. Consideration will be given to natural pollinators. No applications if wind speed exceeds 5 mph or drift is likely to impact non-target areas. All applications will be made at the discretion of Flathead Country Mosquito Control's licensed applicators.

Commented [JR3]: Delete. This has proven impractical due to the variability of weather conditions. All applications are made with the permission of affected property owners, with prior notification.

This Pesticide Discharge Management Plan will be rev	riewed and updated once per calendar year, o	or
whenever necessary to update the pest problem iden	ntified and nest management strategies evalu	ated
	itilied and pest management strategies evalu	atca
for the Flathead County Mosquito Control District.		
FOMOD D	. B-1-	
FCMCD Representative	Date	
Flathead City-County Board of Health Chairperson	Date	
Flathered County Managetta Control Birthir		
Flathead County Mosquito Control District		
Pesticide Discharge Management Plan (Revised <mark>January</mark>	28, 2021) Updated upon approval	
		Page 10 of 10



Flathead City-County Health Department

1035 First Ave. West Kalispell, MT 59901 (406) 751-8101 FAX 751-8102 www.flatheadhealth.org Community Health Services
751-8110 FAX 751-8111
Environmental Health Services
751-8130 FAX 751-8131
Family Planning Services
751-8150 FAX 751-8151
Home Health Services
751-6800 FAX 751-6807
WIC Services
751-8170 FAX 751-8171
Animal Shelter
752-1310 FAX 752-1546

Finance Report

Date: 1/5/2022

To: Board of Health Members

From: Kirk Zander

Re: Finance Update

The following update covers the period from December 1 to December 31, 2021.

Budget

The Commissioners approved a 4% increase in wages that will take effect on February 4th. The Health Department general fund and grants will be able to absorb this increase. In addition, the FY23 budget cycle has started, and I will update you as it progresses.

General Health Fund (Page 1 - 2)

The preliminary cash balance at the end of December is just over \$1.4 million compared to a balance of \$1.5 million a year ago. Immunization Clinic revenues are down 23% from the previous year and expenses also down, 18%. Accounts receivable balance at end of December is \$105K, increasing from \$95K in November. Environmental Health revenues are up over 12% from last year and expenses remain under budget.

Capital Improvement (Page 3)

Mosquito department will be purchasing a truck and utility terrain vehicle. The Animal Shelter will be acquiring a digital radiography system.

Home Health (Page 4)

Home Health December cash balance is a negative \$50K. This represents a cash balance increase of approximately \$8K since end of November. AR balance at the end of December is \$304k, down \$26K from \$330k the previous month. Total cash and net account receivable balance is \$206K, after allowance for doubtful accounts estimate. This is \$32k lower than the previous month.

Program dashboards (Pages 5 - 10)

No Updates.

Kirk Zander



Flathead County Health Department
General Health Fund Budget FY22
Year to Date Summary, December 31, 2021
Total Budget vs. YTD Actual, Cash Basis, Adjusted*

	General Health Fund Budget					
	Budget FY22	Actual YTD	Variance YTD			
Revenue						
Tax Revenue	1,825,752	972,884	(852,868)			
Fee & Other Revenue	1,385,416	902,799	(482,617)			
Transfers In	4,000	4,000				
	3,215,168	1,879,683	(1,335,485)			
Expenditures						
Salary	1,592,265	628,276	963,989			
Benefits	633,585	248,751	384,834			
Supplies	454,400	198,401	255,999			
Contracted Services	399,951	319,024	80,927			
Transfers Out	14,677	8,000	6,677			
Transfers Out - Capital	75,000	-	75,000			
Capital Outlay			_			
	3,169,878	1,439,952	1,767,426			
Net Increase/(Decrease)	45,290	439,731	431,941			
Cash Recon						
*Beginning Cash, July 1, 2021	1,051,149					
Change in Cash, YTD	439,731					
Ending Cash, December 31, 2021	1,490,880					

Flathead County Health Department
General Health Fund Budget FY22
Department Detail, Cash Basis, Adjusted*
YTD Budget vs. YTD Actual, December 31, 2021

	Summ	ary All Departr	ments		Administration	1	Im	nmunization/C	D	Env	ironmental He	alth	Fac	ilities/Sharps	
	Budget	Actual	Variance	Budget	Actual	Variance	Budget	Actual	Variance	Budget	Actual	Variance	Budget	Actual	Variance
	YTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD	YTD
Revenue															
Tax Revenue	912,876	972,884	60,008	912,876	972,884	60,008									
Fee & Other Revenue	692,708	902,799	210,091	153,701	397,623	243,922	226,580	136,627	(89,953)	312,427	368,549	56,122			
Transfers In	2,000	4,000	2,000		-	-							2,000	4,000	2,000
	1,607,584	1,879,683	272,099	1,066,577	1,370,507	303,930	226,580	136,627	(89,953)	312,427	368,549	56,122	2,000	4,000	2,000
Expenditures															
Salary	796,133	628,276	167,857	217,633	191,257	26,376	202,119	86,307	115,812	346,903	323,659	23,244	29,478	27,053	2,425
Benefits	316,793	248,751	68,042	66,921	54,004	12,917	82,610	33,914	48,696	149,331	143,853	5,478	17,932	16,980	952
Supplies	227,200	198,401	28,799	34,175	24,537	9,638	180,475	164,621	15,854	8,550	9,243	(693)	4,000	-	4,000
Contracted Services	199,976	319,024	(119,049)	118,023	277,268	(159,246)	48,505	15,422	33,083	33,198	26,292	6,906	250	42	208
Transfers Out	7,339	8,000	(662)	3,164	8,000	(4,836)	3,200	-	3,200	975	-	975	-	-	-
Transfers Out - Capital	37,500	37,500	-	37,500	37,500	-	-	-	-	-	-	-	-	-	-
Capital Outlay													<u> </u>		
	1,584,939	1,439,952	144,987	477,415	592,566	(115,151)	516,909	300,264	216,645	538,956	503,047	35,909	51,660	44,075	7,584
Net Increase/(Decrease)	22,645	439,731	417,086	589,162	777,941	188,779	(290,329)	(163,637)	126,692	(226,529)	(134,498)	92,031	(49,660)	(40,075)	9,584
				YTD Tax Rev (Collected Throu	gh Dec	IZ/CD Revenue from last year	~		EH Revenue u over last year	_				
				to last year b	get and over co y 1%. Due to Co d engineering ex	OVID,	Exp under bud compared to la	~		Exp under buc by 10%.	lget, and up ov	ver last year	Exp under budg to last year	et and compa	rable

Flathead County Health Department Health CIP Budget FY22 Year to Date Summary, December 31, 2021 Total Budget vs. YTD Actual, Cash Basis

	He	Health CIP Budget					
	Budget FY22	Actual YTD	Variance YTD				
Revenue							
Interest Earnings	2,000	984	(1,016)				
Auction Proceeds	-	-	-				
Transfers In	75,000	37,500	(37,500)				
	77,000	38,484	(38,516)				
Expenditures							
Vehicle #1	30,000	-	30,000				
AC Chiller	118,236	3,201	115,035				
Smart TV	6,000						
Transfers Out - Capital							
	154,236	3,201	145,035				
Net Increase/(Decrease)	(77,236)	35,283	106,519				
Cash Recon							
Beginning Cash, July 1, 2021	943,654						
Change in Cash, YTD	35,283						
Ending Cash, December 31, 2021	978,937						

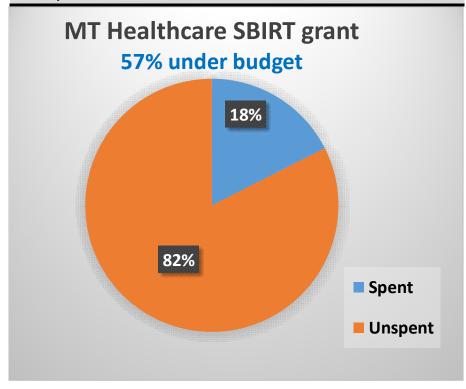
Flathead County Health Department Home Health FY22 Year to Date Summary, December 31, 2021 Total Budget vs. YTD Actual, Cash Basis

	Но	me Health Budge	t
	Budget	Actual	Variance
	FY22	YTD	YTD
evenue			
Private Pay	180,000	130,862	(49,138)
Federal Stimulus	-	-	-
Medicare	900,000	323,916	(576,084)
Medicaid	5,000	5,915	915
Misc			-
	1,085,000	460,693	(624,307)
xpenditures			
County Employees	22,439	-	22,439
Contracted Services	1,251,000	545,336	705,664
Building Rental	40,700	20,288	20,412
Insurance	4,800	5,096	(296)
IT Service Charge	3,440	1,720	1,720
	1,322,379	572,440	749,939
Net Increase/(Decrease)	(237,379)	(111,747)	125,632
Cash Recon			Aver
eginning Cash, July 1, 2021	59,708		FY21
Change in Cash, YTD	(111,747)		FY20
inding Cash, December 31, 2021	(52,039)		FY19
			FY18
			FY17
ash and Account Receivable			FY16
cct Receivable, December 31, 2021	303,915		
Less: Allowance for Doubtful Accounts	(45,587)		
et Accounts Receivable	258,328		
nding Cash, December 31, 2021	(52,039)		
Cash and Net Account Receivable	206,289		

^{*} estimated at 15% of AR Balance

Health Administration Grants FY'22 Expenditures as of 12/31/21

MT HC SBIRT		\$	%				
Budget	\$	50,000	100%				
Spent	\$	8,780	18%				
Unspent	\$	41,220	82%				
NAT Healtheans CDIDT arent							



Private

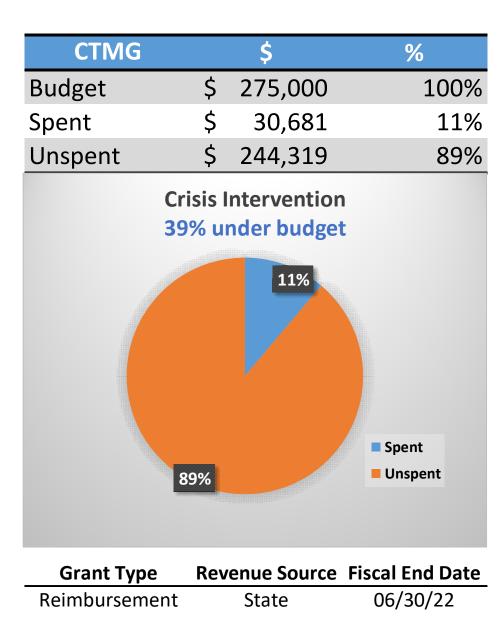
Grant Type

Deliverable

Revenue Source Fiscal End Date

06/30/22

Transform BH		\$	%
Budget	\$	25,000	100%
Spent	\$	17,000	68%
Unspent	\$	8,000	32%
		havioral H	ealth
12%	un	der budget	
		The state of the s	
32%			
		68%	
			■ Spent
			Unspent
Grant Type	Rev	enue SourceF	iscal End Date
Deliverable		Private	05/31/22



\$

%

MOSQUITO

AIR QUALITY		\$	%
Budget	\$	50,213	100%
Spent	\$	3,066	6%
Unspent	\$	47,147	94%
449	% und	Quality der budget 6%	■ Spent ■ Unspent

Grant Type

Deliverable

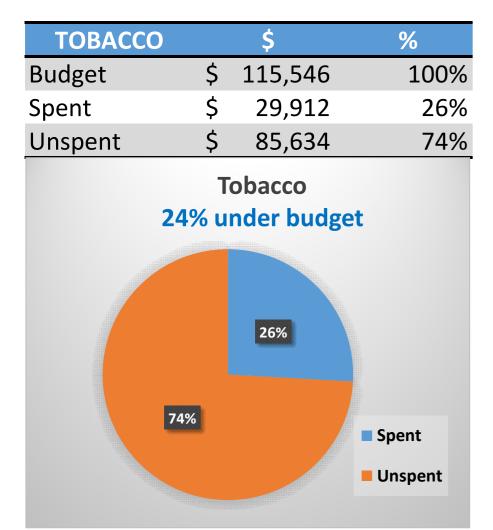
Revenue Source Fiscal End Date

06/30/22

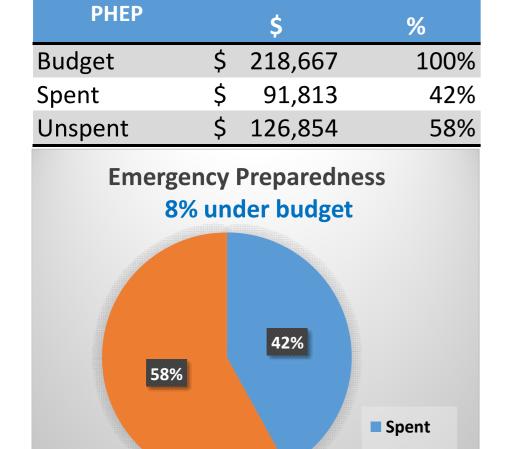
Federal/State

Budget	\$	246,049	100%
Spent	\$	92,254	37%
Unspent	\$	153,795	63%
13%	Moso 6 unde	quito er budget	
63%			SpentUnspent
Health Dept	Rev	enue Source	Fiscal End Dat
Mosquito		Tax Levy	06/30/22

Health Promotion Programs FY'22 Expenditures as of 12/31/21



Grant Type	Revenue Sourc	e Fiscal End Date
Deliverable	State	06/30/22



Grant Type

Deliverable

Unspent

06/30/22

Revenue Source Fiscal End Date

Federal

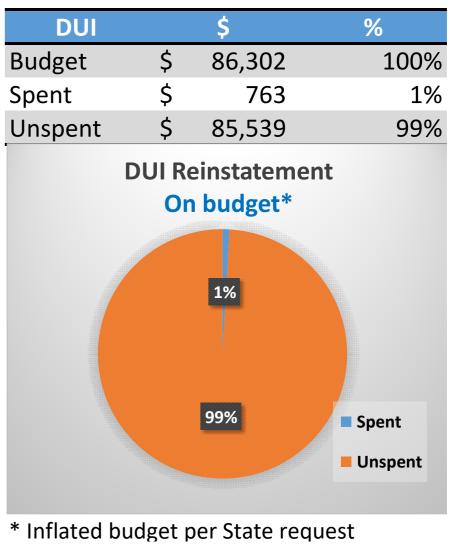
BUCKLE UP		\$	%
Budget	\$	47,455	100%
Spent	\$	7,339	15%
Unspent	\$	40,116	85%
10%		kle Up der budget	
		15%	
	85%	A Control of the Cont	■ Spent
		And the second s	■ Unspent
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

Grant Type	Revenue Source Fiscal End Date			
Reimbursment	Federal	09/30/22		

CANCER			
CONTROL		\$	%
Budget	\$	161,334	100%
Spent	\$	81,098	50%
Unspent	\$	80,236	50%
		Control dget	
50%		50%	■ Spent
			■ Unspent
Grant Type	Rev	renue Source F	iscal End Date

Federal/State

Deliverable



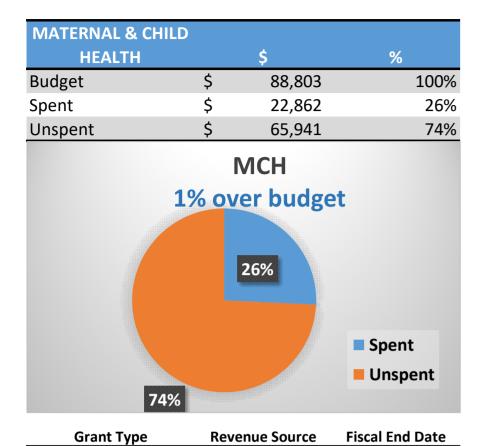
* Inflated budget per State request

Grant Type Revenue Source Fiscal End Date

Deliverable State 06/30/22

06/30/22

Community Health Programs FY'22 Expenditures as of 12/31/21



wic	Ś	%
Budget	\$ 350,000	100%
Spent	\$ 65,721	19%
Unspent	\$ 284,279	81%

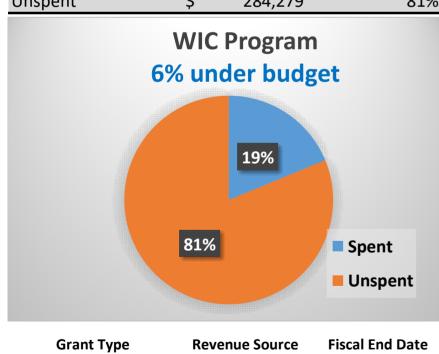
Federal

Deliverable

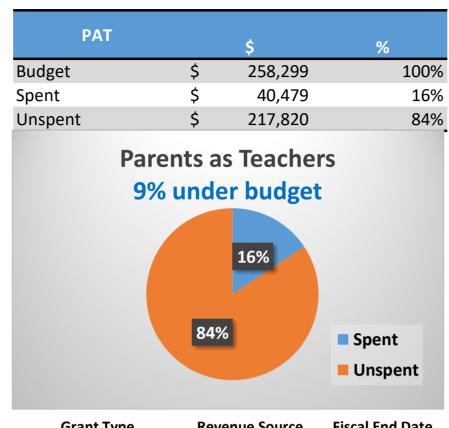
Reimbursement

09/30/22

09/30/22



Federal



Grant Type	Revenue Source	Fiscal End Date
Reimbursement	State	09/30/22

IMMUNIZATION			
GRANT		\$	%
Budget	\$	991,198	100%
Spent	\$	440,587	44%
Unspent	\$	550,611	56%
Immunization grant 6% under budget			
56	5%	44%	
			Spent
			Unspent
Grant Type	Rev	enue Source	Fiscal End Date

ASTHMA		\$	%
Budget	\$	30,000	100%
Spent	\$	15,109	50%
Unspent	\$	14,891	50%
	Ast	hma	
	At b	udget	
50%			
_			
		50%	■ Spent
			Unspent
Grant Type	Re	venue Source	Fiscal End Date
Reimbursement		State	06/30/22

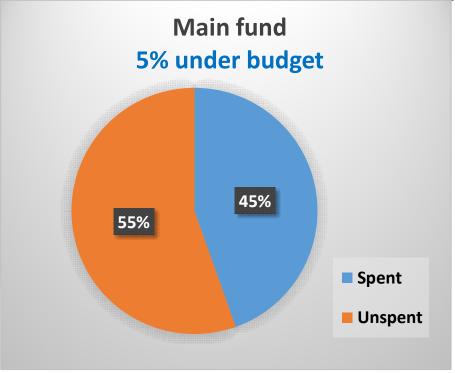
Federal

06/30/22

Deliverable

Animal Shelter FY'22 Expenditures as of 12/31/21

MAIN FUND	\$	%
Budget	\$ 474,553	100%
Spent	\$ 211,462	45%
Unspent	\$ 263,091	55%



Animal Shelter Tax Levy & Fees 06/30/22

Health Dept

Revenue Source Fiscal End Date

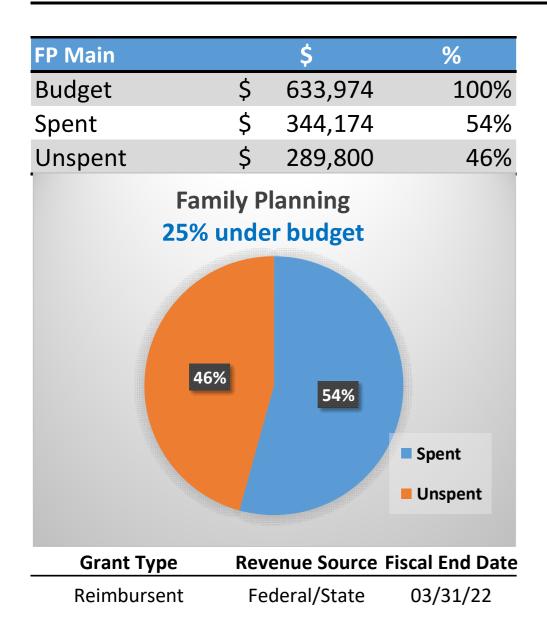
DONATIONS	5				
FUND		\$	%		
Budget	\$	476,850	100%		
Spent	\$	260,016	55%		
Unspent	\$	216,834	45%		
Donations fund 5% over budget					
	45%	55%			

Health Dept	Revenue Source	Fiscal End Date
Animal Shelter	Donations	06/30/22

■ Spent

Unspent

Family Planning FY'22 Expenditures as of 12/31/21



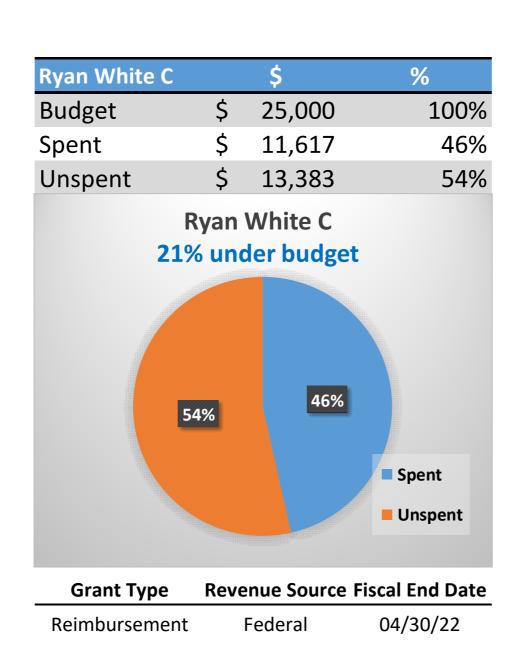
HIV Prevention		\$	%
Budget	\$	72,574	100%
Spent	\$	72,574	100%
Unspent	\$	-	0%
		vention dget	
		0%	Service of the control of the contro
		100%	SpentUnspent
Grant Type	Reve	enue Source	Fiscal End Date
Reimbursement		Federal	12/31/21

			21	
Ryan White B		\$	%	
Budget	\$	30,000	100%	
Spent	\$	3,359	11%	
Unspent	\$	26,641	89%	
Ryan White B 39% under budget				
	89%	11%	Spent Unspent	
Grant Type	Reve	enue Source Fis	scal End Date	

State

Reimbursent

06/30/22



January 14, 2022

To: Flathead City-County Board of Health

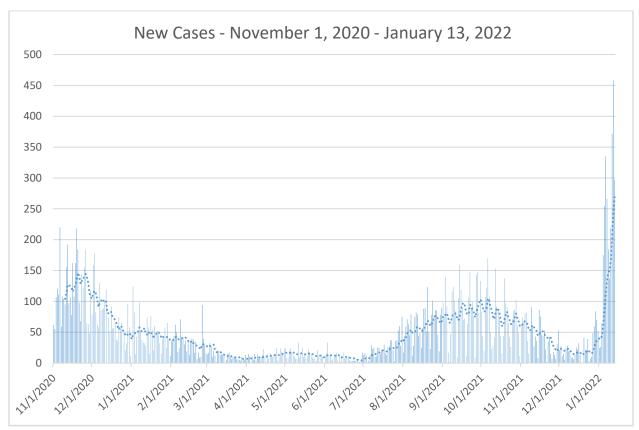
From: Joe Russell, Health Officer

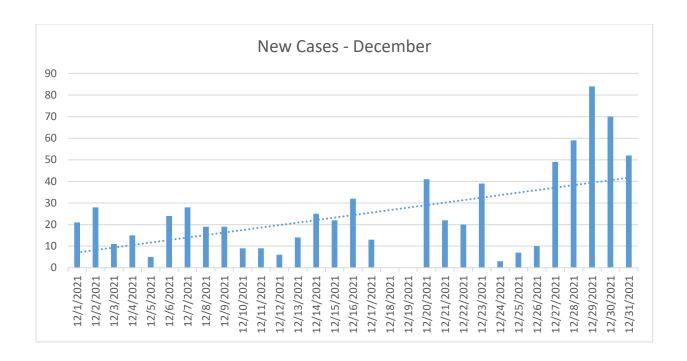
Re: Health Officers Report

This will report matters of public health significance to the Board of Health for the period: December 13, 2021through January 14, 2022.

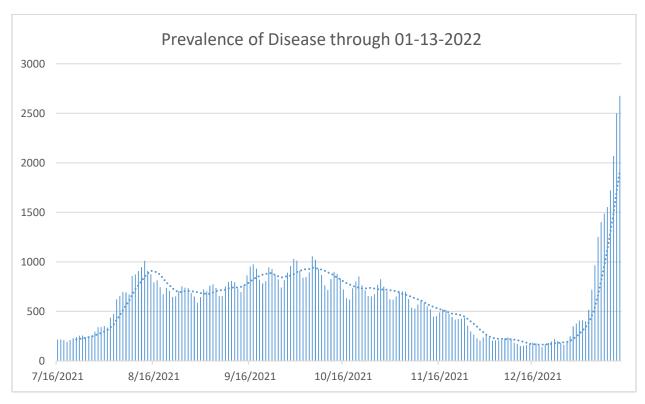
COVID - 19 Response

The following two slides indicate the new cases within a specific date period. The first slide indicates the incidence of COVID-19 disease from November 1, 2020 through January 13, 2022. A ten-day moving average has been applied to the chart. Our average number of new cases per day in November and December was 42.7 and 24.4. A look at the graph of new cases in December, it is evident that COVID – 19 (most likely the Delta variant) was waning for the first three weeks and then the Christmas holiday and the Omicron variant hit the county. The average cases of new cases through January 13 is 216.3. It appears we will be in the new variant pattern for the next several weeks

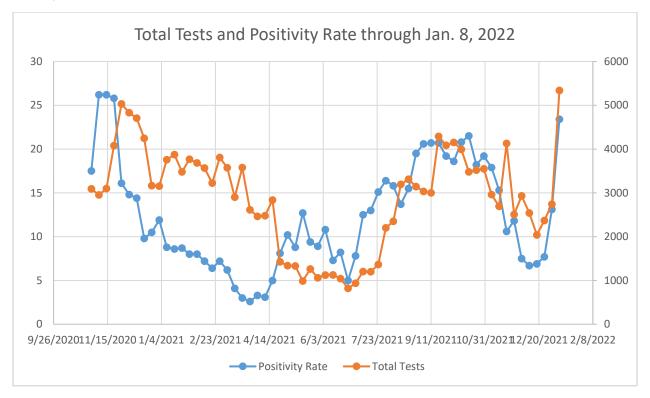




The next chart shows the prevalence of COVID-19 disease in Flathead County. Prevalence is the number of active cases on any given day. Even though the CDC has moved the isolation period to five days, we will continue to define active cases as a ten-day period. Flathead County has over 2500 active cases.

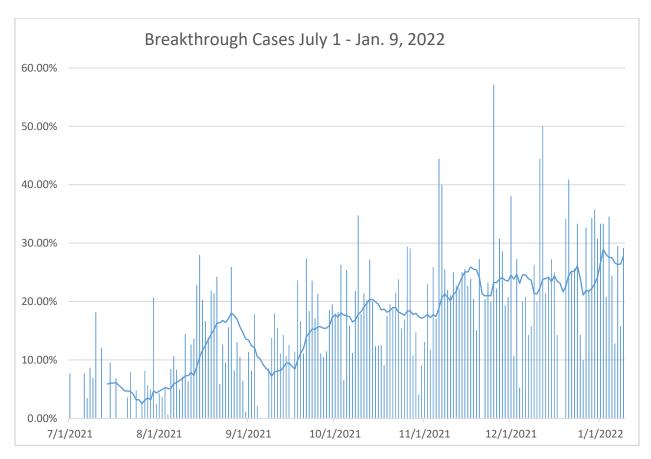


The graph below compares laboratory positivity test rates and total tests conducted in Flathead County.

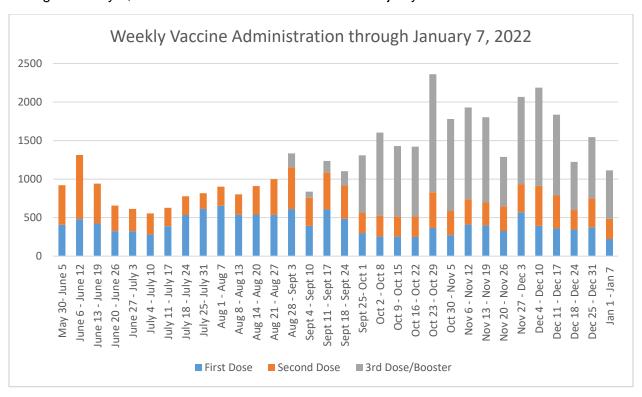


Our positivity rate the week of January 8, 2022 climbed to 23.4% and our total testing nearly doubled from the week prior. The Omicron variant continues to increase in prevalence. As of Monday, January 10, 80% of the specimens genetically sequenced are the Omicron variant.

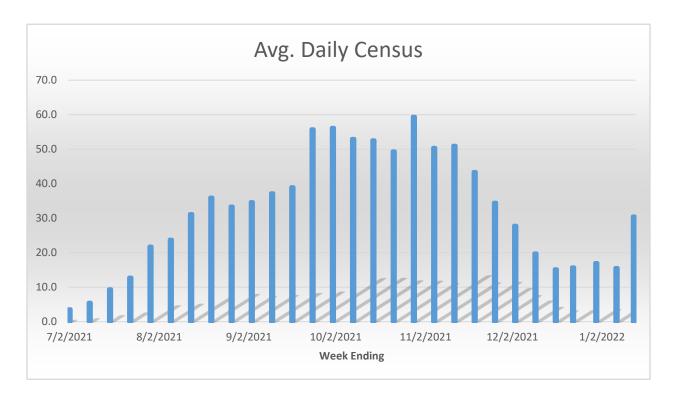
The following slide indicates the breakthrough cases observed from July 1, 2021 to January 9, 2022. Breakthrough cases in December average 24% of all cases identified. So far in January, the average for breakthrough cases is averaging 26%.



The following graph indicates all COVID-19 vaccinations administered in Flathead County through January 7, 2022. Third doses/boosters are the majority of vaccinations administered.



The following slide is the average daily census reported on a weekly basis. This past week indicates that hospitalization have doubled from the week prior.



Health Officer Cease and Desist Orders

Pete's Fried Chicken remains unresolved. David Randall has issued a letter to cease operation and Pete is and has filed charges. David continues to work with the attorneys with the Montana Building Codes Bureau on further action. A warrant has been issued for the operator.

Flathead County Regulations for Sewage Treatment Systems

The environmental health committee will be reviewing potential changes to the Regulations within the next few weeks and will bring amendments forward at the February Board meeting.

Board of Health Guidance Document

We have provided Board members a Guidance Document. This document has been substantially remodeled due to changes in the statutes made by the 2021 Montana Legislature. Please read the document and we will determine how the document will be reviewed.

Authorities of the Health Officer and Local Board of Health to Respond to the COVID-19 Outbreak

The Administrative Rule of Montana 37.114.315 provides the authority necessary to respond to a novel communicable disease causing an outbreak.

37.114.315 POTENTIAL OUTBREAKS

(1) Whenever a communicable disease listed in ARM <u>37.114.203</u>, or the "Control of Communicable Diseases Manual, An Official Report of the American Public Health Association" (20th edition, 2015), or other communicable disease that constitutes a threat to the health of the public, becomes so prevalent as to endanger an area outside of the jurisdiction where it first occurred, the local health officer of the jurisdictional area in which the disease occurs must notify and cooperate with the department to control the transmission of the disease in question.

History: <u>50-1-202</u>, MCA; <u>IMP</u>, <u>50-1-202</u>, <u>50-2-118</u>, MCA; <u>NEW</u>, 1987 MAR p. 2147, Eff. 11/28/87; <u>AMD</u>, 1994 MAR p. 1295, Eff. 5/13/94; <u>AMD</u>, 2000 MAR p. 2528, Eff. 9/22/00; <u>TRANS</u>, from DHES, 2002 MAR p. 913; <u>AMD</u>, 2006 MAR p. 2112, Eff. 9/8/06; <u>AMD</u>, 2013 MAR p. 967, Eff. 6/7/13; <u>AMD</u>, 2017 MAR p. 343, Eff. 3/25/17.

There are certain powers and duties that must be performed by local boards of health and health officers. They are described in Title 50, Chapter 2 of the Montana Codes Annotated:

50-2-116. Powers and duties of local boards of health. (1) It is a purpose of this chapter to address ongoing issues or conditions created during a declared state of emergency as a result of orders, directives, or mandates issued by the governor as allowed under Title 10, chapter 3, for a state of emergency acting longer than 7 days. It is not a purpose of this chapter to hinder, slow, or remove nonemergency-related powers granted to a local board of health.

- (2) In order to carry out the purposes of the public health system, in collaboration with federal, state, and local partners, each local board of health shall:
 - (a) recommend to the governing body the appointment of a local health officer who is:
 - (i) a physician;
 - (ii) a person with a master's degree in public health; or
 - (iii) a person with equivalent education and experience, as determined by the department;
 - (b) elect a presiding officer and other necessary officers:
 - (c) adopt bylaws to govern meetings;
 - (d) hold regular meetings at least quarterly and hold special meetings as necessary;

- (e) identify, assess, prevent, and ameliorate conditions of public health importance through:
- (i) epidemiological tracking and investigation;
- (ii) screening and testing;
- (iii) isolation and quarantine measures;
- (iv) diagnosis, treatment, and case management;
- (v) abatement of public health nuisances;
- (vi) inspections;
- (vii) collecting and maintaining health information;
- (viii) education and training of health professionals; or
- (ix) other public health measures as allowed by law;
- (f) protect the public from the introduction and spread of communicable disease or other conditions of public health importance, including through actions to ensure the removal of filth or other contaminants that might cause disease or adversely affect public health;
- (g) supervise or make inspections for conditions of public health importance and issue written orders for compliance or for correction, destruction, or removal of the conditions;
- (h) bring and pursue actions and issue orders necessary to abate, restrain, or prosecute the violation of public health laws, rules, and local regulations;
- (i) identify to the department an administrative liaison for public health. The liaison must be the local health officer in jurisdictions that employ a full-time local health officer. In jurisdictions that do not employ a fulltime local health officer, the liaison must be the highest ranking public health professional employed by the jurisdiction.
- (j) subject to the provisions of 50-2-130, propose for adoption by the local governing body necessary regulations that are not less stringent than state standards for the control and disposal of sewage from private and public buildings and facilities that are not regulated by Title 75, chapter 6, or Title 76, chapter 4. The regulations must describe standards for granting variances from the minimum requirements that are identical to standards promulgated by the board of environmental review and must provide for appeal of variance decisions to the department as required by 75-5-305. If the local board of health regulates or permits water well drilling, the regulations must prohibit the drilling of a well if the well isolation zone, as defined in 76-4-102, encroaches onto adjacent private property without the authorization of the private property owner.
- (3) Local boards of health may:
 - (a) accept and spend funds received from a federal agency, the state, a school district, or other persons or entities;

- (b) propose for adoption by the local governing body necessary fees to administer regulations for the control and disposal of sewage from private and public buildings and facilities;
- (c) propose for adoption by the local governing body regulations that do not conflict with 50-50- 126 or rules adopted by the department:
- (i) for the control of communicable diseases;
- (ii) for the removal of filth that might cause disease or adversely affect public health;
- (iii) subject to the provisions of 50-2-130, for sanitation in public and private buildings and facilities that affects public health and for the maintenance of sewage treatment systems that do not discharge effluent directly into state water and that are not required to have an operating permit as required by rules adopted under 75-5-401;
- (iv) subject to the provisions of 50-2-130 and Title 50, chapter 48, for tattooing and bodypiercing establishments and that are not less stringent than state standards for tattooing and body-piercing establishments;
- (v) for the establishment of institutional controls that have been selected or approved by the:
 - (A) United States environmental protection agency as part of a remedy for a facility under the federal Comprehensive Environmental Response, Compensation, and Liability Act of 1980, 42 U.S.C. 9601, et seq.; or
 - (B) department of environmental quality as part of a remedy for a facility under the Montana Comprehensive Environmental Cleanup and Responsibility Act, Title 75, chapter 10, part 7; and (vi) to implement the public health laws;
- (d) adopt rules necessary to implement and enforce regulations adopted by the local governing body; and
- (e) promote cooperation and formal collaborative agreements between the local board of health and tribes, tribal organizations, and the Indian health service regarding public health planning, priority setting, information and data sharing, reporting, resource allocation, service delivery, jurisdiction, and other matters addressed in this title.
- (4) A local board of health may provide, implement, facilitate, or encourage other public health services and functions as considered reasonable and necessary.
- (5) A directive, mandate, or order issued by a local board of health in response to a declaration of emergency or disaster by the governor as allowed in 10-3-302 and 10-3-303 or by the principal executive officer of a political subdivision as allowed in 10-3-402 and 10-3-403:
 - (a) remains in effect only during the declared state of emergency or disaster or until the governing body holds a public meeting and allows public comment and the majority of the governing body moves to amend, rescind, or otherwise change the directive, mandate, or order; and

- (b) may not interfere with or otherwise limit, modify, or abridge a person's physical attendance at or operation of a religious facility, church, synagogue, or other place of worship.
- **50-2-118.** Powers and duties of local health officers. (1) In order to carry out the purpose of the public health system, in collaboration with federal, state, and local partners, local health officers or their authorized representatives shall:
 - (a) make inspections for conditions of public health importance and issue written orders for compliance or for correction, destruction, or removal of the condition;
 - (b) take steps to limit contact between people in order to protect the public health from imminent threats, including but not limited to ordering the closure of buildings or facilities where people congregate and canceling events;
 - (c) report communicable diseases to the department as required by rule;
 - (d) establish and maintain quarantine and isolation measures as adopted by the local board of health; and
 - (e) pursue action with the appropriate court if this chapter or rules adopted by the local board or department under this chapter are violated.
- (2) A directive, mandate, or order issued by a local health officer in response to a declaration of emergency or disaster by the governor as allowed in 10-3-302 and 10-3-303 or by the principal executive officer of a political subdivision as allowed in 10-3-402 and 10-3-403:
 - (a) remains in effect only during the declared state of emergency or disaster or until the governing body holds a public meeting and allows public comment and the majority of the governing body moves to amend, rescind, or otherwise change the directive, mandate, or order; and
 - (b) may not interfere with or otherwise limit, modify, or abridge a person's physical attendance at or operation of a religious facility, church, synagogue, or other place of worship.



Flathead City-County Health Department

1035 lst Ave. West Kalispell, MT 59901 (406)-751-8101 FAX 751-8102 www.flatheadhealth.org Community Health Services 406-751-8110 FAX 866-380-1740 Environmental Health Services 406-751-8130 FAX 406-751-8131 Flathead Family Planning 406-751-8150 FAX 855-931-9091 Population Health Services 406-751-8101 FAX 406-758-2497 WIC Services 406-751-8170 FAX 406-751-8171 Animal Shelter 406-752-1310 FAX 406-752-1546

Quarantine and Isolation Procedures for Highly Pathogenic Diseases



Quarantine and Isolation Procedures for Highly Pathogenic Diseases

Background

The Flathead City-County Board of Health (Board) desires to establish a quarantine and isolation procedure that will allow for a rapid response in the event that a pathogen of high severity is suspected or identified in Flathead County.

The Board of Health recognizes the importance of isolation and quarantine as public health measures to control the spread of disease in a community. Isolation refers to the separation of persons who have a specific infectious illness from those who are healthy and the restriction of their movement to stop the spread of that illness. People in isolation may be cared for in their homes, in hospitals, or in designated healthcare facilities. Quarantine refers to the separation and restriction of activities up to and including strict confinement to a designated location of persons who, while not yet ill, have been exposed to an infectious agent and therefore may become infectious.

Montana Code Annotated § 50-2-116 provides for the Powers and Duties of Local Boards of Health. Section (1)(f)(iii) states "In order to carry out the purposes of the public health system, in collaboration with federal, state, and local partners, each local board of health shall identify, assess, prevent, and ameliorate conditions of public health importance through isolation and quarantine measures." Montana Code Annotated § 50-2-118 provides for the Powers and Duties of Local Health Officers. Section 4 states "In order to carry out the purpose of the public health system, in collaboration with federal, state, and local partners, local health officers or their authorized representatives shall establish and maintain quarantine and isolation measures as adopted by the local board of health."

Policy

It is the intent of the Board to establish a procedure that will allow the Health Officer, acting on their behalf, to initiate immediate public health control measures of isolation and/or quarantine in the event that a highly pathogenic disease is suspected or identified in Flathead County. The Board shall specify that certain processes be established to allow the Health Officer to initiate public health measures of isolation and quarantine that are the least restrictive possible while ensuring the public's health is maintained.

Procedure

Upon notification of a suspected or confirmed case of a highly pathogenic disease the Health Officer shall notify the Montana Department of Public Health and Human Services (DPHHS) Communicable Disease Program, the Flathead City-County Board of Health Chair, the Health Department's Medical Advisor and, if available, a physician with specialized training in infectious diseases at Kalispell Regional Medical Center or

North Valley Hospital. Through a consultative process with the above-mentioned entities or individuals, the Health Officer shall issue an order establishing the most reasonable quarantine and/or isolation measures that are protective of the public health. Orders of the Health Officer shall not be publically released except as specified in Montana Code Annotated § 50-16-603; "Confidentiality of Health Care Information". All orders issued by the Health Officer shall be provided to the Board as soon as practicable through normal communication channels. The Board understands that certain information in an Order may be redacted to protect health information and identities of affected individuals.

Adopted by the Board of Health on	, 2014	
Glen Aasheim, M.D., Chair Flathead City-County Board of Health		



1035 1st Ave. West Kalispell, MT 59901 (406)-751-8101 FAX 751-8102 www.flatheadhealth.org Community Health Services 406-751-8110 FAX 866-380-1740 Environmental Health Services 406-751-8130 FAX 406-751-8131 Flathead Family Planning 406-751-8150 FAX 855-931-9091 Population Health Services 406-751-8101 FAX 406-758-2497 WIC Services 406-751-8170 FAX 406-751-8171 Animal Shelter 406-752-1310 FAX 406-752-1546

COVID-19-HB 702 Guidance





COVID-19 - HB 702 Guidance

House Bill (HB) 702, passed during Montana's 67th Legislative Session, adds discrimination on the basis of vaccination status to the Montana Human Rights Act, which prohibits certain types of discrimination (see Title 49, Chapter 2, Part 3 of the Montana Code Annotated). This document provides general information on HB 702 as it relates to measures taken by local governments and schools to curtail the spread of COVID-19. The information contained in this document does not, and is not intended to, constitute legal advice. Readers of this document are strongly encouraged to consult with their attorney to obtain advice with respect to whether a particular policy, practice, or procedure is compliant with HB 702, or whether such action may constitute a prohibited act of discrimination.

HB 702 makes it an unlawful discriminatory practice for a person or governmental entity to deny a person any local or state services, goods, facilities, advantages, privileges, licensing, educational opportunities, health care access, or employment opportunities, based on the person's vaccination status or whether the person has an immunity passport.

Considerations for Local Government

With respect to any mandatory quarantine or isolation measure, a local government should consider whether the measure it seeks to implement ties the decision to require quarantine or isolation to an individual's vaccination status and whether the measure has the effect of treating unvaccinated individuals differently and less favorably than vaccinated individuals.

The Department encourages all individuals to follow current Centers for Disease Control and Prevention recommendations on quarantine and isolation when not in conflict with state law. Additionally, depending on the circumstances, unvaccinated individuals who do not quarantine or isolate despite having knowledge of having come into close contact with an infected person or being infected could potentially be subject to claims of legal liability from individuals they infect within the community.

In protecting public health and taking into account the requirements of HB 702, examples of quarantine and isolation measures local governments may want to consider include:

- Quarantine and isolation measures that apply regardless of an individual's vaccination status. For example, ordering isolation of unvaccinated infected individuals, as long as vaccinated individuals who are infected with breakthrough cases are also subject to such orders.
- Strongly recommending, but not ordering, quarantine of unvaccinated close contact
 individuals and isolation of unvaccinated infected individuals. Recommendations could
 also include voluntary masking and other COVID-19 precautionary measures, such as
 social distancing, regardless of vaccination status.

Contact: Jon Ebelt, Public Information Officer: 406-444-0936/ jebelt@mt.gov.

Document updated on 9-1-21



Advising individuals of current CDC guidance and how it applies to their situation (i.e., close contact) and recommending they follow it as it relates to their vaccination status, but not mandating or requiring compliance with such guidance. This could be paired with advising individuals that noncompliance with CDC guidance that results in the infection of others could result in personal liability.

Considerations for Schools (K-12)

HB 702 does not apply to school vaccination requirements for students set forth under Title 20, Chapter 5, Part 4 of the Montana Code Annotated. However, COVID-19 is not a communicable disease for which vaccination is required under the statutes. *See* section 20-5-403, MCA. Schools should therefore consider the requirements of HB 702 when enacting measures related to the control of COVID-19. The same considerations discussed above for local governments apply to schools with respect to COVID-19.

Considerations for Schools (Postsecondary)

Postsecondary schools may impose immunization requirements as a condition of attendance that are more stringent than those required under Title 20, Chapter 5, Part 4 of the Montana Code Annotated. However, immunization requirements imposed by a postsecondary school must allow for religious and medical exemptions under section 20-5-405, MCA.

With respect to quarantine and isolation measures, the same considerations discussed above for local governments apply to postsecondary schools.

Joseph Russell

From:	
Sent:	

Harwell, Todd <tharwell@mt.gov> Thursday, September 2, 2021 9:50 AM

To:

Joseph Russell

Subject:

RE: HB 702 Covid-19 guidance

Hi Joe:

That came from the director's and governor's office. You are right about isolation.

Todd

From: Joseph Russell <jrussell@flathead.mt.gov>
Sent: Wednesday, September 1, 2021 5:44 PM

To: Harwell, Todd <tharwell@mt.gov>

Subject: [EXTERNAL] Re: HB 702 Covid-19 guidance

Todd,

Who wrote this? Why does it mention isolation at all? Regardless of vaccination status, lab positive case will be isolated. There is no reason to throw confusion into this already impossible situation.

I am not one to reply all so I won't

Joe

Sent from my iPhone

On Sep 1, 2021, at 4:47 PM, Harwell, Todd < tharwell@mt.gov > wrote:

Hi All:

The DPHHS Director's and Legal Affairs Offices developed the attached guidance related to HB 702 and vaccination status. I just wanted to share that with you.

Thank you,

Todd Harwell, MPH
Administrator
Public Health and Safety Division
Montana DPHHS

<9-1-21 COVID-19 - HB 702 Guidance.pdf>



1035 1st Ave. West Kalispell, MT 59901 (406)-751-8101 FAX 751-8102 www.flatheadhealth.org Community Health Services 406-751-8110 FAX 866-380-1740 Environmental Health Services 406-751-8130 FAX 406-751-8131 Flathead Family Planning 406-751-8150 FAX 855-931-9091 Population Health Services 406-751-8101 FAX 406-758-2497 WIC Services 406-751-8170 FAX 406-751-8171 Animal Shelter 406-752-1310 FAX 406-752-1546

Isolation and Quarantine Protocols In Flathead County Schools







1035 1st Ave. West Kalispell, MT 59901 (406)-751-8101 FAX 751-8102 www.flatheadhealth.org Community Health Services 406-751-8110 FAX 866-380-1740 Environmental Health Services 406-751-8130 FAX 406-751-8131 Flathead Family Planning 406-751-8150 FAX 855-931-9091 WIC Services 406-751-8170 FAX 406-751-8171 Animal Shelter 406-752-1310 FAX 406-752-1546

August 24, 2021

To: Parents of Children in Flathead County Schools

From: Joe Russell, Health Officer

Re: Isolation and Quarantine Protocols in Flathead County Schools

Early identification of infected persons with COVID-19 disease and rapid response is critical in the school setting. Rapid response is enhanced with strong communication and clearly established responsibilities between the Health Department and schools. This memorandum describes the Health Department's position on isolation and quarantine.

- If someone tests positive for COVID-19 (<u>infected person</u>), that person will have a mandatory 10-day isolation period from the onset of symptoms or the laboratory testing date if onset of symptom date is not readily identifiable. A health care provider will be the first contact to the infected person or their parent/guardian and will instruct the patient to isolate. The Health Department will follow-up as soon as notified of the positive laboratory result.
- If someone is exposed based on proximity and duration to someone who tests positive
 for COVID-19, that person is a <u>close contact</u> and is advised to quarantine with certain
 exceptions listed below. An infected person is capable of transmitting disease 48 hours
 prior to symptom onset or date of testing if they are asymptomatic. Criteria of exposure
 must include this pre-symptomatic period.
- A close contact (through proximity and duration of exposure) in a school setting is defined as:
 - Someone who is within six feet of an infected person for a cumulative duration of 15 minutes within a 24-hour period (three 5-minute exposures with 24 hours is a close contact). Exception: The close contact definition excludes <u>students</u> who were within 3 to 6 feet of an infected student if both the infected student and the exposed student(s) correctly and consistently wore a well-fitting mask the entire time.
 - Quarantine will not be advised for any person who is a lab-identified COVID-19 case infected within the past 90 days. Status will be verified through the State of Montana's infectious disease surveillance and reporting system.





CDC guidance (https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html) advises that if you are fully vaccinated, (14 days past completing the Moderna and Pfizer 2 dose series or single dose of Janssen-Johnson and Johnson) quarantine is not necessary unless you develop symptoms associated with COVID-19 illness. CDC advises fully vaccinated close contacts to wear a mask when out in public for 14 days after last day of exposure to a positive COVID-19 case and get tested 3-5 days after exposure.

Quarantine time periods are as follows:

- A ten (10) day quarantine period is advised for all close contacts. Quarantine will end on the date specified by the Health Department and return to the school setting on day eleven (11) if the person is free of COVID-19 symptoms.
- The quarantine period may be shortened to seven (7) days with following guidance:
 - Five days after exposure, a person advised to quarantine may test for the presence/absence of COVID-19 disease. If the laboratory test is negative and the person has no symptoms at the seventh day of quarantine, the person may return to the school setting on day eight. Be advised that the shortest duration of quarantine is seven days. For determining the absence of disease, either a PCR test performed by a certified molecular laboratory or a rapid antigen test performed by a health care provider is necessary.

If you have any questions regarding this matter, please call Joe Russell at 406-751-8155.





HEALTH DEPARTMENT

Flathead City-County Health Department

1035 lst Ave. West Kalispell, MT 59901 (406)-751-8101 FAX 751-8102 www.flatheadhealth.org Community Health Services 406-751-8110 FAX 866-380-1740 Environmental Health Services 406-751-8130 FAX 406-751-8131 Flathead Family Planning 406-751-8150 FAX 855-931-9091 Population Health Services 406-751-8101 FAX 406-758-2497 WIC Services 406-751-8170 FAX 406-751-8171 Animal Shelter 406-752-1310 FAX 406-752-1546

DATE	File Date: 8/24/21
Dear	

Your child has been identified as a close contact to a person with a known case of COVID-19 disease. Based upon this exposure, your child is advised to quarantine at home for ten (10) days since their last exposure. Based upon exposure information, your child's quarantine period commences immediately and will run through [date]. Quarantine can end after Day seven (7) if your child does not develop any symptoms and they receive a negative test result (test must occur on Day five (5) or later).

Quarantine is a very important public health measure to limit the transmission of COVID-19 disease in the Flathead Community. During your quarantine period, we request that you utilize the automated SARA Alert system and test for COVID-19 disease as appropriate. This automated system will allow you to post signs and symptoms to Health Department staff in a discreet and confidential manner. The SARA alert system will contact you by the contact information we have on file. Laboratory testing is encouraged during the quarantine period, especially if you feel that you are developing symptoms related to COVID-19 disease. The athome rapid antigen test is acceptable for determining if you are infected. Please remember that a negative test will only reduce your quarantine period to 7 days if the test is conducted on day 5 or later of your quarantine period. For determining the absence of disease to reduce the quarantine period, either a PCR test performed by a certified molecular laboratory or a rapid antigen test performed by a health care provider is necessary.

Quarantine will not be advised for any person who is a lab-identified COVID-19 case infected within the past 90 days. Status will be verified through the State of Montana's infectious disease surveillance and reporting system. CDC guidance (https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html) advises that if you are fully vaccinated, (14 days past completing the Moderna and Pfizer 2 dose series or single dose of Janssen-Johnson and Johnson) quarantine is not necessary unless you develop symptoms associated with COVID-19 illness. CDC advises fully vaccinated close contacts to wear a mask when out in public for 14 days after last day of exposure to a positive COVID-19 case and get tested 3-5 days after exposure.

Please contact the Flathead City-County Health Department COVID-19 line at 406-751-8250. Choose option 2 if you have questions about your quarantine. If you have any questions about COVID-19 symptoms and testing, please call the KRH 24/7 Hotline at 406-890-7272 or your healthcare provider. Testing sites can be found at the following link COVID Testing | COVID-19 Preparedness & Updates | Patients and Visitors | KRHC | Logan Health.

Thank you for your cooperation regarding this matter.

Flathead City-County Health Department







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Updated COVID-19 Isolation and Quarantine Guidance





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Memorandum

January 5, 2022

To: Flathead County School Superintendents for Distribution

From: Joe Russell, Flathead County Health Officer

Re: Updated COVID-19 Isolation and Quarantine Guidance

On December 27, 2021, the US Centers for Disease Control and Prevention (CDC) made significant changes to the isolation and quarantine periods established for COVID-19. The Flathead City-County Health Department will adopt this guidance effective immediately. The following will summarize what you should expect from the Health Department.

Isolation

A five-day, stay at home isolation period is required for all people that test positive for COVID-19, regardless of vaccination status. The isolation period will commence at the onset of symptoms or a positive test result. As an example, if you feel symptoms of COVID-19 on Tuesday and your first test on Wednesday is positive, your first day of isolation is Tuesday and stay at home quarantine will end after Saturday. We strongly encourage the use of a properly fitted mask for five days following the end of the stay at home isolation. Although we encourage the use of the at-home rapid antigen test, they are not considered confirmatory of COVID-19. A positive at-home test will be factored into the isolation period as long as it is followed by a positive school-based test or a positive test administered by a health care provider.

Quarantine

How quarantine will be recommended will be based on vaccination status and previous COVID-19 illness. An exposed person with a lab-identified case of COVID-19 within the past 90 days will not be advised to quarantine. Individuals that have had two doses of Pfizer or Moderna within the past six months, individuals with one dose of Johnson and Johnson administered within the past two months, or anyone that has received a third dose/booster should follow CDC guidance and forgo the stay at home quarantine. Individuals in this category are considered to have high immune status and are only advised to wear a mask for ten days and test on day five past exposure. If you develop symptoms please stay at home and test as soon as possible.

Individuals that completed their two-dose series of Pfizer or Moderna over six months ago and have not received a booster, a single dose of Johnson and Johnson over two months ago and are not boosted, and anyone not vaccinated shall be advised to stay at home (quarantine) for five days since their last exposure to a COVID-19 case. It is advised to wear a properly fitted mask after the quarantine period on days six through ten. Testing on day five is encouraged. If you develop symptoms please stay at home and test as soon as possible.





HEALTH DEPARTMENT

Flathead City-County Health Department

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DATE

File Date: 12/30/21

Dear _____

Your child has been identified as a close contact to a person with a known case of COVID-19. Your child is advised to quarantine at home for five (5) days after their day of last exposure. Based on the exposure information, your child should begin quarantine immediately and should remain in quarantine through [date]. It is strongly advised to test for COVID-19 infection on day five (5), prior to stopping stay-at-home quarantine. It is also strongly encouraged that a properly fitted mask is worn on day six (6) through day ten (10) from the original exposure.

We encourage you to have your child tested for COVID-19 throughout the five-day quarantine period, especially if they become symptomatic with COVID-19 infection. There are many testing sites and tests available. Testing may be performed by a health care provider or at a school-based testing clinic. At-home testing is also acceptable.

Stay-at-home quarantine is not advised for any person who is a lab-identified COVID-19 case infected within the past 90 days or those who are fully vaccinated within the last six months with two doses of Pfizer or Moderna OR one dose of Johnson and Johnson with the past two months. Status will be verified through the State of Montana's infectious disease surveillance and the immunization reporting system. Individuals meeting these criteria are still encouraged to wear a mask for 10 days after exposure and get a test on day 5 since their last exposure.

If stay-at-home quarantine is not feasible, please wear a mask for the ten-day period following exposure and test on day two (2) and day five (5) from the day of last exposure.

Please contact the Flathead City-County Health Department COVID-19 line at 406-751-8250 and choose option 2 if you have questions about your child's quarantine. If you have any questions about COVID-19 symptoms and testing, please call the Logan Health Nurse Hotline at 406-890-7272 or your healthcare provider. Testing sites can be found at the following link COVID Testing | COVID-19 Preparedness & Updates | Patients and Visitors | KRHC | Logan Health or through your school's web site.

Thank you for your cooperation regarding this matter,

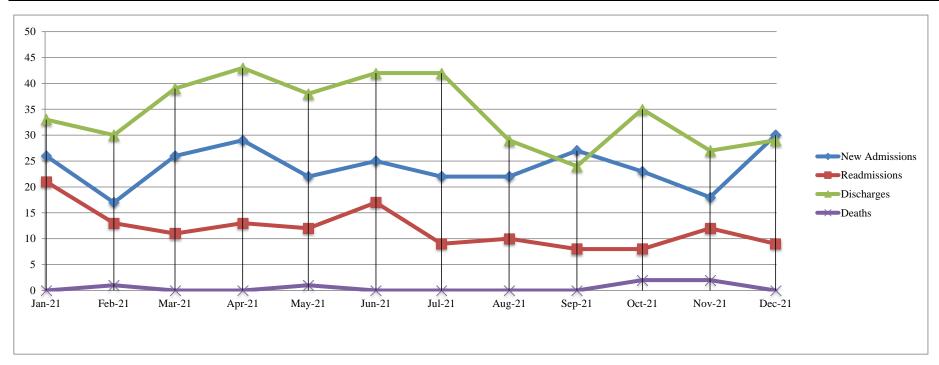
Flathead City-County Health Department





Flathead Choice Home Health Census Statistics 12 Months

Patient Census	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Yearly Average
Beginning Census	44	58	57	55	54	49	49	38	41	52	46	47	590
New Admissions	26	17	26	29	22	25	22	22	27	23	18	30	287
Readmissions	21	13	11	13	12	17	9	10	8	8	12	9	143
Discharges	33	30	39	43	38	42	42	29	24	35	27	29	411
Deaths	0	1	0	0	1	0	0	0	0	2	2	0	6
Ending Census	58	57	55	54	49	49	38	41	52	46	47	57	603

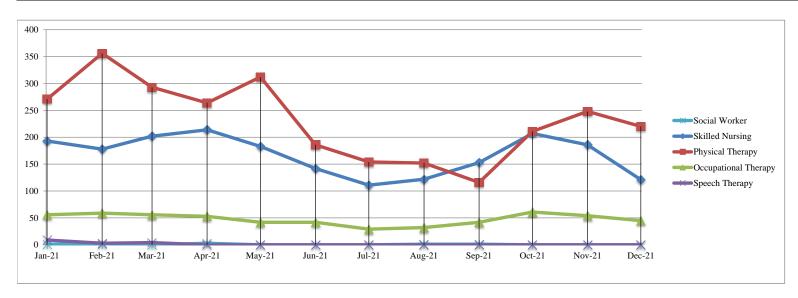


Flathead Choice Home Health Admissions by Referral 12 Months

	_	T			1	T							
	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	12 Month Totals
Alpine Family Medicine		1											1
Bigfork Medical Clinic	1									1			2
Beehive Assisted Living CF	3	1			1	1	1	1		-			8
Beehive Assisted Living Kalispell	3	•	3		1	1	1	•	2	2		2	15
Big Sky Family Medicine	3		1		'	'	'						13
Big Sky IV													0
Brendan House			1				2	1					4
Buchele Plastic Surgery													0
Buffalo Hills Terrace						1		1					2
Coordicare													0
Echoview Assisted Living		1											1
Edgewood Vista		2	1										3
Evergreen Community Clinic			ı								1		1
				2	4					4	1		•
Family Healthcare					1			3		1			7
Flathead Community Clinic	4							1					1
Flathead Valley Orthopedics	1												1
Genesis Healthcare													0
Glacier Medical Associates	7		2		2	5	2	4	2	1	6	6	37
Glacier Neuroscience and Spine												1	1
Glacier Peak Medical													0
Greater Valley Health Care												1	1
Heaven's Peak	2			2		2	1	3		2		2	14
Heritage Place	3	1	1	1	4	3	1						14
Hidden Meadows ALF		5	3			1	11			1	1		12
Home Options / Logan Home Health						1					2	1	4
Hosanna Healthcare	1											1	2
Immanuel Lutheran				1		1				1			3
Kalispell Diagnostics													0
Kalispell Medical Offices	1				2		1	1	1				6
Kalispell Regional Medical Center / Logan Health	7	6	8	14	9	10	7	2	13	9	7	13	105
Kalispell Wound Care Clinic	1		1			1							3
Lakeview Care Center	1	2	1	1	3	1	1						10
North Valley Hospital / Logan Health Whitefish	10	3	5	5	3	6	7	8	9	6	8	8	78
Northwest Family Medicine		1						1	1				3
NW Orthopedic Sports and Medicine		1											1
Prestige Assisted Living												1	1
Renaissance	1												1
Rocky Mountain Heart & Lung													0
Sacred Heart Spokane													0
St. Patricks Hospital			1			1				1	1		4
St Luke's							1		1				2
The Professional Center	1	1	1	1	2	1	1	4		1	1		14
The Retreat			1	4	1	1		1	3		1	1	13
The Springs	1	1	3	3	1	1	3		3	3	2	1	22
Sullivan Park Care Center SNF													0
Timber Creek Village ALF	1		1										2
VA Primary Care	1	1	2	1	2	1		1					9
Veterans Medical Center						1	1			1			3
West Shore Medical Clinic						1	1						2
Whitefish Care and Rehab	1	3		2	1	1						1	9
Woodland Clinic			1		1			1		1			4
TOTALS	47	30	37	37	34	42	32	33	35	31	30	39	427

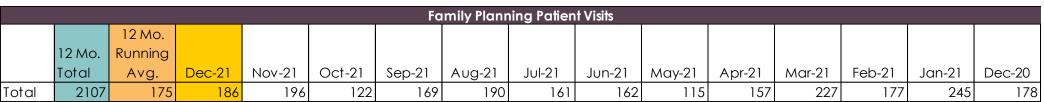
Flathead Choice Home Health Census and Visit Statistics 12 Months

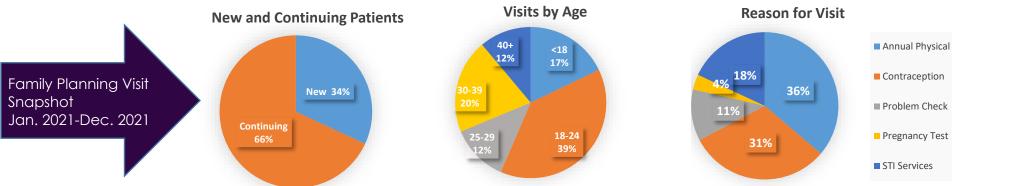
Billable Skilled Visits	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Totals
Skilled Nursing	193	178	202	214	183	142	111	122	153	207	186	121	2012
Physical Therapy	271	356	293	264	312	186	154	152	116	211	248	220	2783
Occupational Therapy	56	59	56	53	42	42	29	32	42	61	54	45	571
Speech Therapy	9	3	4	0	0	0	0	0	0	0	0	0	16
Social Worker	1	1	0	3	0	0	0	1	1	0	0	0	7
Totals	530	597	555	534	537	370	294	307	312	479	488	386	5389



Flathead Family Planning

Board of Health Report - December 2021





	Individuals Reached Through Family Planning Community Presentations and Classes														
		12 Mo.													
	12 Mo.	Running													
	Total	Avg.	Dec-21	Nov-22	Oct-21	Sep-21	Aug-21	Jul-21	Jun-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21	Dec-20
Total	2232	186	55	40	2	169	0	8	37	516	196	355	0	854	0

	Syringe Exchange Collection and Distribution														
		12 Mo.													
	12 Mo.	Running													
	Total	Avg.	Dec-21	Nov-21	Oct. 21	Sep-21	Aug-21	Jul-21	Jun-21	May-21	Apr-21	Mar-21	Feb-21	Jan-21	Dec-20
Syringes Collected	54661	4555	4705	4251	3970	2840	3875	2255	5640	6721	6042	5980	2872	5510	2560
Syringes Distributed	110310	9192	10660	8810	9030	10580	9610	8700	9700	8900	9775	9815	7230	7500	8860

